SKYLINE UMBRELLA FUND ICAV
Application Form ARGA Emerging Market Equity Fund

This Application Form, which acts as an account opening form, should be read in the context of and together with the latest Prospectus & Supplement(s) of the ICAV (collectively referred to as the "Prospectus"), and save where otherwise defined in this Application Form, all capitalised terms shall have the same meaning as in the Prospectus. Please complete all the following sections as indicated.

PLEASE NOTE THAT SEPARATE FORMS ARE REQUIRED FOR SUBSEQUENT (REPEAT) SUBSCRIPTIONS AND REDEMPTIONS OF SHARES. THESE FORMS ARE CONTAINED AT APPENDICES I AND II.

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IMPORTANT: If, as an Irish resident, you are tax-exempt, please ensure that the declaration at Section 4 is completed.

This Application Form constitutes your agreement to subscribe for Shares in the ARGA Emerging Market Equity (the "Sub-Fund"). Once fully completed and signed, this Application Form should be sent to the following address and/or facsimile number, and **if sent by facsimile the original must follow by post**.

Once the signed Account Opening Form and complete identity verification documentation is received and verified, the Administrator will send you an account number that is unique to you, this account number should then be included on the subscription form (see Appendix I for dealing information). The account number must be specified on all subscription forms in order for the deal to be executed. Subscription (dealing) instructions and associated proceeds must not be forwarded until the account number is issued to you by the Administrator. Please note this may take up to 4 Business Days.

Any deal instructions will be rejected until the Account Opening Form and supporting identity verification documentation has been processed and verified by the Administrator.

Skyline Umbrella Fund ICAV
Attention: Skyline TA Queries Team
c/o Northern Trust International Fund Administrators (Ireland) Limited
2nd Floor, Block A, City East Plaza, Towlerton, Ballysimon, Limerick, V94 X2N9, Ireland
T +353 (0)1 434 5124
F +353 (0)1 434 5285
E SkylineTAInstructions@ntrs.com **(Instructions)**
E Skyline_TA_Queries@ntrs.com **(Queries Only)**

SKYLINE UMBRELLA FUND ICAV
Application Form ARGA Emerging Market Equity Fund

1. Registration Details *Please complete in full*

Full Name of Applicant:	
Date of Birth: (Individual Investors only)	

Registered Office Address		Mailing Address (if different)	
Telephone Number:		Telephone Number:	
Contact Name:		Contact Name:	
E-mail Address:		E-mail Address:	

Details of Authorised Contactee/Agent*

By ticking the box opposite and signing this Application Form, I hereby authorise the Administrator to transfer to the authorised contactee/agent copies of contract notes, statements, investor reports and other documentation that may contain my personal details and/or information in relation to my investment in the Sub-Fund. ❒

*If you do not wish to appoint an authorised contactee/agent, please leave this section blank.

Full Name:	
Relationship with the Applicant: (e.g. agent)	

Registered Office Address		Mailing Address (if different)	
Telephone Number:		Telephone Number:	
Contact Name:		Contact Name:	
E-mail Address:		E-mail Address:	

2. Bank Account Details *Please complete in full*

Applicant's Banking Information
Important information regarding bank accounts for subscriptions and redemptions

SKYLINE UMBRELLA FUND ICAV
Application Form ARGA Emerging Market Equity Fund

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

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

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

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

THIS SECTION MUST BE COMPLETED BY ALL INVESTORS OTHER THAN EQUIVALENTLY REGULATED ENTITIES OPENING AN ACCOUNT IN THEIR OWN NAME OR THE NAME OF THEIR NOMINEE COMPANY, EITHER FOR THEIR OWN BENEFIT OR THE BENEFIT OF ONE OR MORE THIRD PARTIES

BANK ACCOUNT DETAILS FROM WHICH SUBSCRIPTIONS WILL BE PAID
BANK ACCOUNT DETAILS FOR SETTLEMENT OF REDEMPTION (AND DIVIDEND/DISTRIBUTION PROCEEDS IF APPLICABLE)

BENEFICIARY BANK INFORMATION

Name of Bank		
A/c Name		
Address of Bank		
A/c Number		
Sort Code		
IBAN:		
Swift Code / ABA		**Reference Code:**

CORRESPONDENT BANK INFORMATION
Note: Required if Payment CCY differs to bank account residency or if your bank account does not support Multi currency payments

Correspondent Bank Name	
Correspondent BIC/SWIFT Code/Sort Code/ABA Code	
Correspondent A/c Name	
Correspondent Account Number / IBAN	
Correspondent Bank Address	

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 to evidence the new bank account details provided are for a bank account registered account name.

3. Distribution/Dividend Requirements

Please complete in full

Distribution/Dividend Requirement
Please indicate below opposite the relevant share class whether you would like you like your distributions/dividends paid by telegraphic transfer to the account specified below or re-invested.

Share Class Name		**Paid into my account (please tick)**	**Reinvested into the Fund (please tick)**
Class A2 USD$ Shares	USD		
Class B2 GBP£ Shares	GBP		
Class W2 GBP Shares	GBP		
Class W2 USD Shares	USD		
Class W2 EUR Shares	EUR		

Please note that if no option is indicated, distribution and dividend payments will be reinvested. Distributions/ dividends paid by telegraphic transfer will be paid to the account details as completed below.

Please complete the Bank Account Details for the account that you wish any dividend payment to be paid (if different to the details provided above):

Bank account details for any dividend payments.

Name of Bank	
SWIFT Code	
Account Number	
Account Name	
Sort Code & IBAN	

Note: No third party payments will be undertaken

Note: A request to change bank account details must be made in writing to the administrator, requiring an original signed instruction, and must be accompanied by a bank statement or banker's reference

Please contact the Administrator if payment details are required in any other currency. Any bank charges in respect of telegraphic transfers or otherwise will be deducted from the amount or value of subscriptions and the net amount invested in Shares. Requests for redemption or distribution payments to be made by telegraphic transfer will be subject to bank charges. The Base Currency of the Sub-Fund and the designated currency of any Shares will be set out in the Supplement. Applications for Shares shall be accepted in the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share Class. At the discretion of the ICAV or the Manager, applications may be accepted in currencies other than the Base Currency.

No redemption payment may be made until the original Application Form has been received by the Administrator and the Administrator is satisfied that all necessary anti-money laundering documentation and checks have been received and completed in full.

By **ticking the box** opposite, I hereby consent to the provision of contract notes, statements and other reports, by secured or encrypted electronic transmission, which may be issued from time to time by the Administrator in respect of my holdings in the ICAV. ❒

4. Declaration of Residency (applicable to Irish resident investors only)

Resident Entities Composite Declaration
Declaration referred to in Section 739D(6)
Taxes Consolidation Act, 1997

This declaration, if it is then still correct, shall apply in respect of any subsequent acquisition of Shares.

- I declare that the information contained in this declaration is true and correct
- I also declare that I am applying for the Shares on behalf of the applicant named below who is entitled to the Shares in respect of which this declaration is made and is a person referred to in Section 739D(6) of the Taxes Consolidation Act, 1997, being a person who is (please tick ✓ as appropriate)

a pension scheme;	
a company carrying on life business within the meaning of section 706 TCA 1997;	
an investment undertaking;	
an investment limited partnership;	
a special investment scheme;	
a unit trust to which section 731 (5)(a) TCA 1997 applies;	
a charity being a person referred to in section 739D(6)(f)(i) TCA1997;	
a qualifying management company;	
entitled to exemption from income tax and capital gains tax by virtue of section 784A(2) TCA, 1997* (see further requirement for Qualifying Fund Manager below);	
a PRSA Administrator;	
a credit union within the meaning of section 2 of the Credit Union Act 1997.	

Additional requirements where the declaration is completed on behalf of a Charity

- I also declare that at the time of making this declaration, the Shares in respect of which this declaration is made are held for charitable purposes only and
  - form part of the assets of a body of persons or trust treated by the Revenue Commissioners as a body or trust established for charitable purposes only, or
  - are, according to the rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Revenue Commissioners.
- I undertake that, in the event that the person referred to in paragraph (7) of Schedule 2B TCA 1997 ceases to be a person referred to in Section 739D(6)(f)(i) TCA, 1997, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

Additional requirements where the declaration is completed by a qualifying fund manager / PRSA Administrator

- I/we* also declare that at the time this declaration is made, the Shares in respect of which this declaration is made
  - are assets of * an approved retirement fund/an approved minimum retirement fund or a PRSA, and
  - are managed by the Declarant for the individual named below who is beneficially entitled to the Shares.

- I/we* undertake that, if the Shares cease to be assets of *the approved retirement fund/the approved minimum retirement fund or the PRSA, including a case where the Shares are transferred to another such fund or account, I/we* will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

Delete as appropriate

Additional requirements where the declaration is completed by an Intermediary

- I/we* also declare that I am/we are* applying for Shares on behalf of persons who
  - To the best of my/our* knowledge and belief, have beneficial entitlement to each of the Shares in respect of which this declaration is made, and
  - Is a person referred to in section 739D(6) TCA, 1997.

- I/we* further 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 persons referred to in section 739D(6) TCA, 1997, and
  - I/we* will inform you in writing if I/we* become aware that any person ceases to be a person referred to in section 739D(6) TCA, 1997.

Delete as appropriate

Name of applicant: _____

Irish tax reference number of applicant: _____

Authorised signatory: _____(declarant)

Title: (Mr/Ms. Etc.) _____

Capacity in which declaration is made: _____

Date: ____/ ____/ ____

Important Notes

1. This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration.
2. Tax reference number in relation to a person has the meaning assigned to it by Section 885 TCA, 1997 in relation to a "specified person" within the meaning of that section. In the case of a charity, quote the Charity Exemption Number (CHY) as issued by Revenue. In the case of a qualifying fund manager, quote the tax reference number of the beneficial owner of the Share.
3. In the case of, (i) an exempt pension scheme, the administrator must sign the declaration; (ii) a retirement annuity contract to which Section 784 or 785 applies, the person carrying on the business of granting annuities must sign the declaration; (iii) a trust scheme, the trustees must sign the declaration. In the case of a charity, the declaration must be signed by the trustees or other authorised officer of a body of persons or trust established for charitable purposes only within the meaning of Sections 207 and 208 TCA 1997. In the case of an approved retirement fund/an approved minimum retirement fund or a PRSA, it must be signed by a qualifying fund manager or PRSA administrator. In the case of an intermediary, the declaration must be signed by the intermediary. In the case of a company, the declaration must be signed by the company secretary or other authorised officer. In the case of a unit trust it must be signed by the trustees. In any other case it must be signed by an authorised officer of the entity concerned or a person who holds a power of attorney from the entity. A copy of the power of attorney should be furnished in support of this declaration.

Declaration of Residence outside Ireland

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

Declaration on own behalf

I/we* declare that I am/we are* applying for the Shares on my own/our own behalf /on behalf of a company* and that I am/we are/the company* is entitled to the Shares in respect of which this declaration is made and that

- I am/we are/the company is* not currently resident or ordinarily resident in Ireland, and
- Should I/we/the company* become resident Ireland, I will/we will* so inform you, in writing accordingly.

Delete as appropriate

Declaration as Intermediary

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 resident nor ordinarily resident in Ireland.

I/we* also declare that:

- Unless I/we* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us* from the date of this application will be made on behalf of such persons: and
- I/we* will inform you in writing if I/we* become aware that any person, on whose behalf I/we*

hold Shares, becomes resident in Ireland.

Delete as appropriate

Name and address of applicant: _____

_____

Signature of applicant or authorised signatory; _____(Declarant)

Capacity of authorised signatory (if applicable): _____

Date: _____/_____/_____

Joint Applicants:

Names:_____ Signatures: _____

_____ _____

Important Notes

1. Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
2. To be valid, the application form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.
3. If the application form (incorporating the declaration required by the Revenue Commissioners) is signed under power of attorney, a copy of the power of attorney must be furnished in support of the declaration.

*An "**intermediary**" means a person who

- carries on a business which consists of, or includes, the receipt of payments from an investment undertaking resident in the State on behalf of other persons;
- holds units in an investment undertaking on behalf of other persons.

Notes in relation to residence / ordinary residence:

Residence — Individual
An individual will be regarded as being resident in Ireland for a tax year if s/he;

- spends 183 days or more in the State in that tax year; or
- has a combined presence of 280 days in the State, taking into account the number of days spent in the State in that tax year together with the number of days spent in the State in the preceding year.

Presence in a tax year by an individual of not more than 30 days in the State will not be reckoned for the purpose of applying the two-year test.

Ordinary Residence — Individual
The term "ordinary residence" as distinct from "residence" relates to a person's normal pattern of life and denotes residence in a place with some degree of continuity. An individual who has been resident in the State for three consecutive tax years becomes ordinarily resident with effect from the commencement of the fourth tax year.

An individual who has been ordinarily resident in the State ceases to be ordinarily resident at the end of the third consecutive tax year in which s/he is not resident. Thus, an individual who is resident and ordinarily resident in the State in 2025 and departs from the State in that year will remain ordinarily resident up to the end of the tax year in 2028.

Residence — Company
Prior to Finance Act 2014, company residence was determined with regard to the long established common law rules based on central management and control. These rules were significantly revised in Finance Act 2014 to provide that a company incorporated in the State will be regarded as resident for tax purposes in the State, unless it is treated as resident in a treaty partner country by virtue of a double taxation treaty. While the common law rule based on central management and control remains in place, it is subject to the statutory rule for determining company residence based on incorporation in the State set out in the revised section 23A TCA 1997.

The new incorporation rule for determining the tax residence of a company incorporated in the State will apply to companies incorporated on or after 1 January 2015.

5. Benefit Plan Investors

In order for the ICAV and each Fund to accurately monitor its "Benefit Plan Investor" participation, please review the following definition and make the appropriate representations by checking all applicable boxes following the definition

The Subscriber represents that it is:

A. □ not a Benefit Plan Investor[1]; or

B. □ a Benefit Plan Investor that is:

1. □ subject to Part 4 of Title I of the Employee Retirement Income Security Act of 1974, as amended ("**ERISA**");

2. □ subject to Section 4975 of the Internal Revenue Code of 1986, as amended (the "**Code**") (that has not checked B1);

3. □ an entity whose underlying assets include "**plan assets**". The Subscriber also represents that the percentage of its "plan assets" compared to the value of its total assets is not more than:

□ 10% □ 20% □ 30% □ 40%
□ 50% □ 60% □ 70% □ 80%
□ 90% □ 100%

(* applicable to entities with multiple classes, one of which exceeds the 25% threshold for Benefit Plan Investors)

4. □ an insurance company general account (or is investing general account assets under the U.S. Department of Labor Advisory Opinion Letter 2005-19A). The Subscriber also represents that the percentage of "plan assets" included in the general account is not more than:

□ 10% □ 20% □ 30% □ 40%
□ 50% □ 60% □ 70% □ 80%
□ 90% □ 100%

[1] A Benefit Plan Investor means (1) an "employee benefit plan" within the meaning of Section 3(3) of the Employee Retirement Income Security Act of 1974, as amended, that is subject to the provisions of Part 4 of Title I of ERISA, (2) an individual retirement account, Keogh plan or other plan described in Section 4975(e)(1) of the US Internal Revenue Code of 1986, as amended, (3) an entity whose underlying assets include "plan assets" by reason of 25% or more of any class of equity interests in the entity being held by plans described in (1) or (2) above, or (4) any other entity (such as an insurance company separate or general account or a group or common trust) whose underlying assets include "plan assets" by reason of an investment in the entity by plans described in (1) or (2) above.

The Subscriber agrees to promptly notify the Manager and the Administrator immediately if the above response changes and to provide any other information reasonably requested by the Fund, the Manager or the Administrator for the purposes of determining whether or not the Fund is holding "plan assets".

If the Subscriber is, or is acting on behalf of, an employee benefit plan (a "**Plan**") which is subject to ERISA, the Subscriber represents and warrants that: (a) it is aware of and has taken into consideration any applicable diversification requirements of Section 404(a)(1)(C) of ERISA; (b) it has concluded that its proposed investment in the Fund is a prudent one and has independently decided to invest in the Fund; (c) the fiduciary or other person signing this Subscription Agreement is independent of the Fund and parties providing services to the Fund (including without limitation the Manager); (d) this subscription and the investment contemplated hereby is in accordance with all requirements applicable to the Plan under its governing instruments and under ERISA; (e) the Subscriber acknowledges and agrees that parties providing services to the Fund shall not be a "fiduciary" (within the meaning of Section 3(21) of ERISA) with respect to any assets of the Plan by reason of the Subscriber's investment in the Fund; (f) the Subscriber represents and warrants that neither the Manager nor any affiliate thereof has acted as a fiduciary to the Subscriber with respect to the decision to invest in the Fund nor have such persons provided investment advice or a recommendation with respect to the decision of the Subscriber to invest in the Fund; and (g) the investment by the Subscriber in the Fund will not result in a "prohibited transaction" under Section 406 of ERISA or Section 4975(c) of the Code.

6. Representations, Authorities, and Indemnities

1. I/we confirm that I am / we are 18 years of age or over (delete if you are not a natural person).
2. If you are joint applicants – We direct that, on the death of one of us, the Shares for which we are applying shall be held in the name of and to the order of the survivor(s) or the executor(s) or administrator of the last such survivor (delete if you are not a natural person or you are a sole investor).
3. I/we confirm that I am / we are not a US Person (as defined in the Prospectus) and am/are not acquiring Shares on behalf of, or for the benefit of, a US Person, nor do I/we intend transferring any Shares which I/we may purchase to any person who is a US Person. I/we confirm that I/we have the authority to make this investment whether the investment is our own or is made on behalf of another person or institution.
4. I/we indemnify the ICAV, Investment Manager, Depositary, Administrator and other Shareholders for any loss suffered by them as a result of me/us acquiring or holding Shares in the ICAV where, by virtue of my / our holding, I am / we are in breach of the laws of any competent jurisdiction.
5. I/we hereby acknowledge as part of this application that I/we have been provided with a copy of the Prospectus and applicable Supplement and where applicable the most recent annual or half-yearly reports and accounts for the ICAV and furthermore that this application is made on the terms thereof and subject to the provisions of the Instrument of Incorporation of the ICAV. In particular, I/we acknowledge that I am/we are aware of the potential risks associated with this investment and where appropriate have sought professional advice on matters of taxation and such other consequences applicable to the investment.
6. I/we hereby agree to indemnify and hold harmless the ICAV, the Manager, the Administrator, the Depositary, the Investment Manager, and their 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 to by me/us to the ICAV or the Administrator. The ICAV, the Investment Manager, and the Administrator will not be responsible or liable for the authenticity of instructions received from 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 to be genuine.
7. The Administrator, the Investment Manager, and the ICAV are each authorised and instructed to accept and execute any instructions in respect of the Shares to which this Application Form relates given by me/us in written form, or by facsimile.
8. I/we agree to indemnify each of the Administrator, the Manager, the Investment Manager, 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 any of them acting upon a facsimile instruction. In circumstances where such instructions relate to a change in the Applicant's Banking Information referred to above, I/we confirm that I/we will provide you with an original instruction.
9. The Administrator, the Investment Manager, the Manager, 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.
10. I/we acknowledge that the ICAV and/or Administrator may refuse to accept any application to subscribe if a prospective investor delays in producing or fails to produce any information required for the purpose of verification as requested by the Administrator and, in that event, any funds received will be returned without interest to the account from which the moneys were originally debited. The ICAV and the Administrator shall not be held liable in this regard.
11. I/we acknowledge that the repurchase proceeds of Shares will only be paid on receipt by the Administrator of a repurchase request from me/us together with such other documentation that the Administrator may reasonably require. I/we further acknowledge that any failure to supply the ICAV or the Administrator with any documentation requested by them may result in a delay in the settlement of redemption proceeds. I/we acknowledge that in such circumstances, the Administrator will process any redemption request

received by me/us and by doing so I/we will no longer be considered a Shareholder/s notwithstanding that I/we have not received the redemption proceeds.

12. I/we confirm that I/we will notify the ICAV and the Administrator if there are any material changes during the lifetime of this investment in the Beneficial Owner Detail which I/we have provided.

13. I/we acknowledge that the ICAV must obtain and hold details of its beneficial owners for the purposes of compliance with the European Union (Anti-Money Laundering: Beneficial Ownership Of Corporate Entities) Regulations 2016 (S.I. No. 560 of 2016) and that my/our personal details may be provided to a central register of beneficial ownership as part of this process.

14. I/we confirm that I/we have the capacity and am/are duly authorised to make this application and to make the representations and give the indemnities referred to in this Application Form.

15. I/we shall provide the ICAV, the Manager and the Administrator with any additional information which it may reasonably request in connection with tax and or/FATCA and/or CRS regulations/reporting requirements or other similar requirements in order to substantiate any representations made by me/us or otherwise and I/we authorise the ICAV or its agents to disclose such information relating to this application to such persons as they consider appropriate. For the purposes of the Tax Reporting Services, the Administrator may assume that the Sub-Fund has obtained any and all effective consents, agreements, waivers or approvals that may be required from Shareholders or others to whom a duty of confidentiality is owed and the Administrator shall not be obliged to enquire further but shall be entitled to rely on any representation made by the Sub-Fund or its duly authorised representatives in this respect.

    I/we agree to provide to the ICAV, the Manager and the Administrator at such times as each of them may request such declarations, certificates or documents as each of them may reasonably require (the "Tax Information") in connection with this investment (including for the purposes of tax and/or FATCA and/or CRS regulations/reporting requirements). Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the ICAV or the Administrator immediately of any such change and further agree to request the redemption of Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the ICAV.

    In addition to any information required to the Tax Information, I/we agree to promptly provide, and periodically update, at any times requested by the ICAV, any information (or verification thereof) the ICAV deems necessary to comply with any requirement imposed by Sections 1471-1474 of the U.S. Internal Revenue Code of 1986, as amended (the "Code"), and any Treasury Regulations, forms, instructions, or other guidance issued pursuant thereto in order to reduce or eliminate FATCA withholding taxes. The information required to be provided by the preceding sentence may include, but shall not be limited to, (A) information the ICAV deems necessary to determine whether the Shareholder is a "foreign financial institution" ("FFI") as defined in Code 1471(d)(4) or a "non-financial foreign entity" ("NFFE") as defined in Code 1472(d), (B) if I/we am/are an FFI, any certification, statement or other information the ICAV deems necessary to determine whether I/we meet the requirements of Code 1471(b) (including entering into an agreement with the IRS pursuant to Code 1471(b) (an "FFI Agreement") and complying with the terms thereof or, if the FFI is in a jurisdiction that has signed an intergovernmental agreement ("IGA") with the United States, complying with the terms of the IGA and any local laws or regulations implementing its terms) or is otherwise exempt from withholding required under Code 1471, (C) if I/we am/are an FFI, including an FFI in a jurisdiction that has signed an IGA, a Global Intermediary Identification Number ("GIIN") assigned by the IRS; and (D) if I/we am/are an NFFE, any certification, statement or other information the ICAV deems necessary to determine whether a shareholder meets the requirements of Code 1472(b) (which information may be given to the U.S. Internal Revenue Service ("IRS") pursuant to Code 1472(b)(3)) or is otherwise exempt from withholding required under Code 1472.

    In addition to the Tax Information, I/we agree to promptly provide, at any times requested by the ICAV, any information (or verification thereof) the ICAV deems necessary for the ICAV to comply with the terms of the IGA and any Irish laws, regulations or other guidance implementing the IGA, and any information required to comply with the terms of that agreement on an annual or more frequent basis. I/we agree to waive any provision of foreign law that would, absent such a waiver, prevent compliance with such requests and

acknowledges that, if it fails to provide such waiver, it may be required by the ICAV to withdraw from the Sub-Fund if necessary to comply with FATCA and/or CRS and the IGA.

By providing the Tax Information, I/we represent and warrant the completeness and accuracy of such information (as at the date of submission) and authorise the ICAV to act upon such information in good faith, including, but not limited to, disclosing or submitting such information to the Irish tax authorities. The ICAV shall have no obligation to carry out any investigation with respect to the truth, accuracy or completeness of the Tax Information provided by us and I/we will, on demand, hold the ICAV harmless from any liability resulting from the my/our failure to provide complete and accurate Tax Information.

I/we hereby acknowledge that if I/we fail to provide the Tax Information on a timely basis, I/we may be subject to 30% U.S. withholding tax on the investor's share of "withholdable payments" (as defined for purposes of FATCA) received by the ICAV.

I/we hereby acknowledge that if I/we fail to provide the Tax Information and such failure results in the ICAV being unable to comply with FATCA, the IGA or CRS the ICAV may exercise its right to completely redeem an applicant (at any time upon any or no notice). I/we further acknowledge and agree to indemnify the ICAV and its other investors for any losses resulting from our failure to meet its obligations under this Section, including any U.S. withholding tax imposed on the ICAV.

16. I/we hereby acknowledge that any notice or document may be served by the ICAV or Administrator on me/us in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000, if I have provided an e-mail address or fax number to the ICAV or its delegate, consent to any such notice or document being sent to me/us by fax or electronically to the fax number or e-mail address previously identified to the ICAV or its delegate which I/we acknowledge constitutes effective receipt by me/us of the relevant notice or document. I/we acknowledge that I/we am/are not obliged to accept electronic communication and may at any time choose to revoke my/our agreement to receive communications by fax or electronically by notifying the ICAV in writing at the above address, provided that my/our agreement to receive communications by fax or electronically shall remain in full force and effect pending receipt by the ICAV of written notice of such revocation.
17. I/we request that the Shares issued pursuant to this application are registered in the name and address set out on page 1 hereof.
18. I/we accept such lesser number of Shares if any, than may be specified above in respect of which this application may be accepted.
19. I/we acknowledge that all telephone calls with the Investment Manager, the Manager, the Administrator or Depositary may be recorded and consent to such recording.
20. I/we agree (i) to provide these representations to the ICAV and/or the Manager at such times as the ICAV and/or the Manager may request, and (ii) to provide on request such certifications, documents or other evidence as the ICAV and/or the Manager may reasonably require to substantiate such representations.
21. I/we agree to notify the ICAV and/or the Manager as soon as reasonably practicable if I/we become aware that any of the representations made is no longer accurate and complete in all respects. I/we agree as soon as reasonably practicable either to sell or to tender to the ICAV for redemption of a sufficient number of Shares to allow the representations to be made again.
22. I/we acknowledge that in respect of a fund which has invested in equity related securities, all or part of that fund's fee and expenses may be charged to the capital of the fund and that this policy will have the effect of lowering the capital value of my/our investment.
23. I/we understand that the confirmations, representations, declarations and warranties made herein are continuing and apply to all subsequent purchases of Shares by me/us in the ICAV.
24. I/we understand that subscription monies paid by me/us into a Subscription/Redemption account will become the property of the Sub-Fund upon receipt and during the period between receipt of subscription monies and the Dealing Day on which Shares are issued, I/we will be treated as an unsecured creditor of the Sub-Fund.

25. I/we understand that any redemption proceeds held for any time in a Subscription/Redemption account shall remain an asset of the Sub-Fund. In the event of the insolvency of the ICAV or the Sub-Fund, I/we will rank as an unsecured creditor of the ICAV until such time as the Administrator is satisfied that its anti-money-laundering procedures have been fully complied with, following which redemption proceeds will be released to me/us.

Key Investor Information Documents ("KIIDs") / Packaged Retail and Insurance-based Investment Products Key Information Documents ("PRIIPs KIDs")

1. I/we hereby acknowledge and confirm that I/we have received, read and understood the KIIDs/ PRIIPs KIDs for the Sub-Fund and Class(es) to which this Application Form relates in good time prior to completing this Application Form. I/we hereby confirm that for any subsequent investments I/we will obtain and read the latest version of the appropriate KIIDs/ PRIIPs KIDs prior to each subscription and that any future investments to any other sub-fund or share class of the ICAV can also be transacted based on this confirmation. The KIIDs are available on https://iqeq.com/skyline/. The PRIIPs KIDs are available on: https://iqeq.com/priips-skyline/
2. I/we represent and acknowledge that:

   I/we have regular access to the internet and acknowledge and agree that the provision of the KIIDs/ PRIIPs KIDs by way of email or website is appropriate in the context in which the business between the ICAV, its delegate(s) and me/us is, or is to be, carried on and that the provision by me/us of my/our email address to the ICAV or its delegate(s) is evidence of this.

   I/we have been offered the choice of receiving the prospectus and the KIIDs/ PRIIPs KIDs on paper and in electronic form by means of a website or by email and hereby specifically consent to receiving the KIIDs in electronic form by email or by accessing the latest version of the document online at https://iqeq.com/skyline/ or the PRIIPs KIDs at https://iqeq.com/priips-skyline/ (or such other website as may be notified to me/us from time to time).

   I/we have also been notified electronically of this website address and the place on the website where the KIIDs/ PRIIPs KIDs can be accessed.

   I/we received or accessed by electronic means the KIIDs/ PRIIPs KIDs.

   I/we consent to accessing the KIIDs/ PRIIPs KIDs by electronic means before making any subsequent and/or future subscriptions for Shares in any Class of the Sub-Fund.

   The KIIDs/PRIIPs KIDs shall be reviewed annually and that the up-to-date version of the KIIDs/PRIIPs KIDs at any given time shall be made available: (i) for the KIIDs on https://iqeq.com/skyline/ ; and (ii) for the PRIIPs KIDs on https://iqeq.com/priips-skyline/ (or such other website as may be notified to me/use from time to time). I/We agree that I/we will inspect the KIIDs/ PRIIPs KIDs by accessing the website in good time before making any subsequent and/or future subscriptions for Shares in any Class of the Sub-Fund. I/We agree that I/we bear sole responsibility for ensuring that I/we have inspected the up- to-date version of the KIIDs/ PRIIPs KIDs and that, in any event, I/we consent to be, and shall be deemed to have been, provided with the up-to-date KIIDs/ PRIIPs KIDs by means of the website in good time before any subsequent or future subscriptions.

   Where I/we are acquiring the Shares for or on behalf of any person in my/our capacity as a sub-distributor of the ICAV, I/we certify that prior to accepting any order for the acquisition of Shares, I/we will ensure that the investor will be provided with the current KIIDs/ PRIIPs KIDs for the relevant Share Class. Where permitted by applicable law, "provided" shall include informing the investor of the applicable website where the KIIDs may be obtained, which is https://iqeq.com/skyline/ and for the PRIIPs KIDs is https://iqeq.com/priips- skyline/ (or such other website address as may be notified to me/us from time to time).

   I/we may at any time request a hard copy of any such documentation from the Sub-Fund free of charge and/or revoke, in writing or other authorised manner, the consent given to receive such information electronically or to subscribe or redeem Shares of the Sub-Fund electronically.

Data Protection

A. I/We consent to personal information obtained in relation to me/us being handled by the Administrator, the Manager, the ICAV, or the Investment Manager and their delegates, agents or affiliates in accordance with the Irish Data Protection Acts 1988 to 2003. Information in relation to me/us will be held, used, disclosed and processed for the purposes of (a) managing and administering my/our holdings in the Sub- Fund and any related account on an ongoing basis; (b) for any other specific purposes where I have given specific consent to do so; (c) to carry out statistical analysis and market research (d) to comply with any applicable legal, tax or regulatory obligations including legal obligations under company law, tax law and anti-money laundering legislation and (e) for disclosure and transfer whether in Ireland or elsewhere (including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in Ireland) to third parties including my/our financial adviser (where appropriate), regulatory bodies, taxation authorities, auditors, technology providers or to the Sub-Fund and its delegates and its or their duly appointed agents and any of their respective related, associated or affiliated companies for the purposes specified above; (f) For other legitimate business interests of the Sub-Fund. I/We hereby acknowledge my/our right of access to and the right to amend and rectify my/our personal data, as provided herein. I/We understand that the Sub-Fund is a data controller and will hold any personal information provided by me/us in confidence and in accordance with the Data Protection Act 1988 to 2003. The Administrator may only transfer personal data outside of the EEA by using an EU- approved 'model contract' by means of which the non-EEA data receiver agrees to abide by the instructions of the data controller (the Administrator), and agrees to comply with security measures which are appropriate to the circumstances of the data transfer, and which are specified in the contract itself.

B. I/We consent to the recording of telephone calls that I/we make to and receive from the Administrator, the Manager, the ICAV or the Investment Manager and their delegates or duly appointed agents and any of their respective related, associated or affiliated companies for record keeping, security and/or training purposes. I/We consent to the ICAV, the Manager or the Investment Manager sending information about other investment services to me/us by letter, telephone or other reasonable means of communication. I/We understand that I/we have a right to request not to receive such information. The Administrator or ICAV may disclose personal information to the Depositary and/or the Manager and/or the Investment Manager and/or third parties where necessary or for legitimate business interests. This may include disclosure to third parties such as auditors and the Central Bank of Ireland or agents of the Administrator who process the personal information for anti-money laundering purposes or for compliance with foreign regulatory requirements. The Administrator may and will hold all or part of the information in relation to your shareholding in accordance to legal and regulatory requirements even after you have fully redeemed from the fund.

C. I/we consent to the processing of my/our information and the disclosure of my/our information as outlined above and to the Manager and/or the Investment Manager and where necessary or in the ICAV's legitimate interests to any company in the Investment Manager's group of companies or agents of the ICAV including companies situated in countries outside the European Economic Area, which may not have the same data protection laws as in Ireland.

D. From time to time, the Manager and/or the Investment Manager may send you information about other products or services which they offer. You have a right to request not to receive such information.

If you do wish to receive such information and/or marketing material, **please tick here**: ❒

W Shares Classes

1. I/we represent, warrant and undertake that I am/we are a client/affiliate of Willis Towers Watson, or such other advisors, distributors, platforms or intermediaries with which the Investment Manager has a separate engagement and as such, I am/we are permitted to invest in the Class WA Shares, Class W1 Shares and Class W2 Shares (together the "W Share Classes").
2. I/we represent, warrant and undertake that if I am/we are no longer a client/affiliate of Willis Towers Watson, or such other advisors, distributors, platforms or intermediaries as the Investment Manager, in consultation with the Manager and the ICAV, permit to invest in the W Share Classes, I/we will use best efforts to undertake to transfer or redeem my Shares from the W Share Classes unless otherwise agreed with the ICAV, in consultation with the Investment Manager.

Terms and Conditions of Service for instructions issued to the Administrator via email

SKYLINE UMBRELLA FUND ICAV
Application Form ARGA Emerging Market Equity Fund

Introduction

If you (hereinafter referred to as the "Investor") wish to send Northern Trust International Fund Administration Services (Ireland) Limited, (the "Administrator"), instructions in respect of the Shares of Fund (the "Fund") in portable document format ("PDF") or commonly used equivalent scanned form which is transmitted to the Administrator via email, then the terms as set out below will apply to the Investor's account.

IT IS IMPORTANT THAT THE INVESTOR READS THESE TERMS AND CONDITIONS OF SERVICE CAREFULLY.

By completing the appropriate documentation (e.g. original subscription forms, additional subscription forms, transfer/switch requests or redemption forms) and instructing the Administrator in respect of the Shares of the Fund via email, the Investor will have accepted the following Terms and Conditions of Service.

A. Procedure for PDF Instructions

1. The email address to submit PDF instructions SkylineTAInstructions@ntrs.com**. This address is to be solely used for sending PDF instructions via email in respect of the shares in the Fund**.
2. The Investor shall ensure that the PDF instruction is signed by properly authorised persons, scanned and attached to a **blank email** which is addressed to SkylineTAInstructions@ntrs.com.
3. Please ensure that the Investor blank e-mail does not contain any text or non-text items including but not limited to logos.
4. Each blank e-mail sent to the email address specified above may only include **one** PDF file attachment. However, the single PDF file attachment may contain multiple instructions in relation to Shares in more than one Sub-Fund. A blank e-mail with multiple PDF attachments will be rejected by the Administrator.
5. PDF instructions received without the scanned PDF form attached will not be accepted.
6. Upon receipt of an email with the scanned PDF instruction, the Administrator will send the Investor a task number by auto-response.
    a. The task number acknowledges receipt of the Investor's instruction.
    b. The task number is not confirmation of placement of the instruction.
    c. The Administrator must be in receipt of the instruction prior to the relevant dealing deadline as set out in the Fund's Prospectus. The Administrator will not be responsible for any delays in receipt.
    d. If the Investor does not receive a task number by auto response, it is the Investor's responsibility to contact the Administrator by telephone (details confirmed within the application form) to confirm that the Administrator has received the Investor's instruction.
7. If the Investor sends the Administrator a PDF dealing instruction in respect of the shares in the Fund to a mailbox other than specified above, the Administrator will reject the instruction and/or the deal will not be placed. Notification of rejection may not be given prior to the dealing cut off.
8. In cases where the Investor has supplied the Administrator with a "group" email address, the Administrator will have fully discharged its responsibilities where it has sent any communication to this "group" address.
9. The Investor should not send a duplicate instruction by alternative means to the Administrator as this could lead to a duplicate e.g deals being placed in error.
10. The Investor is not obliged to instruct in this manner.

B. General Terms and Conditions of Service:

1. Email is not a secure form of communication and may be subject to interception, interruption, corruption, distortion, non-delivery, loss, may not be confidential, secure or error free and may contain viruses. Using and relying on email involves increased risk of fraud and of miscommunications including those due to a telecommunications system or equipment failure, misdirected communications or illegibility of the instructions or documents and the Investor will bear the risks if the Investor wishes to conduct the Investor's dealings using email.
2. The Administrator is authorised and instructed to accept and execute any instructions in respect of shares in the Fund given by the Investor in PDF form or by email. The Administrator will rely conclusively upon, and neither the Company nor the Administrator shall incur liability in respect of any action taken upon any instruction believed in good faith to be genuine.

3. Neither the Company nor the Administrator will be responsible or liable for the authenticity of instructions received from the Investor 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.

Neither the Company nor the Administrator will accept responsibility or liability of any nature whatsoever arising out of or in connection with instructions given by the Investor in PDF form or by email, including without limitation, the Investor's use of an incorrect email address, failure of the Investor's transmission, interception, alteration or corruption of the Investor's email transmission, non-receipt of the Investor's electronic instruction, failure of technical infrastructure, error, omission, interruption, deletion, defect, delay in operation or transmission, computer virus, communication line failure, or any allotment, switch or redemption or other action taken in good faith by the Administrator upon any electronic instruction. In addition, neither the Company nor the Administrator will be liable for any failure to act upon electronic instructions due to equipment failure or for any cause that is beyond the control of the Administrator.

7a. 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 and guidance on FATCA or CRS please refer to the Irish Revenue or the OECD websites at: https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx

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

(Mandatory fields are marked with an *)

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".

***Section 1**: **Account holder Identification**

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

***Country of Incorporation or Organisation:** _____

***Current (Resident or Registered) Address**:

Number: _____Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____Country: _____

Mailing address (if different from above):

Number: _____Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____Country: _____

*__Section 2: FATCA Declaration:__

Please tick **either** (I) **or** (II) **or** (III) below **and** provide U.S TIN or exemption code as appropriate, and complete the appropriate sections below based on your FATCA classification.

(I) Specified U.S Person -(also complete Sections 4 and 5 below) ☐

U.S Federal Taxpayer Identification Number (TIN) _____

(II) U.S Person but not a Specified U.S Person –(also complete Sections 4 and 5 below) ☐

W9 Exemption Code: _____

(III) Not a Specified U.S Person-(also complete Sections 3, 4 and 5 below) ☐

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

Complete either Section 3.1 and 3.2 OR Section 3.3 OR Section 3.4

3.1 Financial Institutions (Fis) under FATCA:

If the Entity is a Financial Institution, tick one of the below categories I, II, III and provide a GIIN at 3.2; if not, complete section 3.3 to explain type of Entity you are and why a GIIN cannot be provided.

I.	Irish Financial Institution (FI) or other Partner Jurisdiction Financial Institution (FI)	☐
II.	*Registered Deemed Compliant Foreign Financial Institution*	☐
III.	*Participating Foreign Financial Institution*	☐

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

☐☐☐☐☐.☐☐☐☐☐.☐☐.☐☐☐

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

I.	The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN. Provide the sponsor's name and sponsor's GIIN: **Sponsor's Name:** _____ **Sponsor's GIIN**: ☐☐☐☐☐☐.☐☐☐☐☐.☐☐.☐☐☐	☐

	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 GIIN with the IRS unless and until reportable accounts are identified*	
II.	***The Entity is an Exempt Beneficial Owner*** ***Confirm the type of Exempt Beneficial Owner below;***	☐
	Government Entity ☐ / *International Organisation* ☐	
	Foreign Central Bank ☐ / *Exempt Retirement Fund* ☐	
	Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners ☐	
III.	***The Entity is a Certified Deemed Compliant Foreign Financial Institution*** *(including a deemed compliant Financial Institution under Annex II of the IGA agreement* ***Indicate exemption:*** _____	☐
IV.	***The Entity is a Non-Participating Foreign Financial Institution (NPFFI)***	☐
V.	***The Entity is an Excepted Foreign Financial Institution*** ***Indicate exemption:***	☐
VI.	***The Entity is a Trustee Documented Trust*** ***Please also provide your Trustee's name and GIIN below*** ***Trustee Name:*** _____	☐
	Trustee GIIN ☐☐☐☐☐☐.☐☐☐☐☐.☐☐.☐☐☐	

3.4. Non-Financial Institutions (Non-Foreign Financial Entity/NFFE) under FATCA:
If the Entity is not a Financial Institution but a Non-Financial Foreign Entity (NFFE) , please confirm the Entity's FATCA classification by ticking one of the below categories;

I.	***Active (NFFE)***	☐
II.	***Passive (NFFE)*** *Confirm Type of Passive NFFE that applies (a) or (b) below* ***a. Passive (NFFE) with <u>no</u> Controlling Persons that are specified U.S Persons.*** ***OR***	☐
	b. Passive (NFFE) with Controlling Persons that are specified U.S Persons *(If this box is ticked, also **complete section 6 below** and provide separate individual self-certification forms from each of the Controlling Persons)*	☐
III.	***Excepted (NFFE)***	☐
IV.	***Direct Reporting (NFFE) (Please provide your GIIN)*** ☐☐☐☐☐☐.☐☐☐☐☐.☐☐.☐☐☐	☐

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

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and all associated tax identification numbers ("TIN")).

Please refer to the OECD CRS Web Portal for AEOI for more information on Tax Residence and TIN's.
http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759

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

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

a) You are tax resident in a Jurisdiction that does not issue a TIN
Or
b) You are tax resident only in a non-reportable Jurisdiction for CRS (i.e. Ireland or the USA)

Please list ALL Tax ID Numbers below

Country of Tax Residency	**Tax ID Number (or TIN equivalent)**	**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	☐	The Account Holder is otherwise unable to obtain a TIN *(Please explain why you are unable to obtain a TIN)* _____
Reason C	☐	No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

Please tick this box to confirm you have specified all jurisdictions in which the Entity is resident for tax purposes. ☐

***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 on CRS to assist with classification, please see the OECD CRS Standard and associated commentary.

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

5.1 Financial Institutions (FI's) under CRS:

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

Note: *Please check the Irish Revenue AEOI portal at the time of completion of this form to confirm whether your country of Tax Jurisdiction is considered Participating or Non-Participating for the purposes of CRS Due-Diligence in Ireland.*
https://www.revenue.ie/en/companies-and-charities/documents/aeoi/participating-jurisdictions.pdf

CRS Financial Institution Type;

I.	**A reporting Financial Institution resident in a participating CRS Jurisdiction** *(including an Investment Entity, Depository FI, Custodial Institution, Specified Insurance company)*	
II.	**A Financial Institution resident in a Non-Participating CRS Jurisdiction** **Please also tick the type of FI that applies**	
	FI- Investment Entity resident in a Non-Participating Jurisdiction and is managed by another Financial Institution *(If this box is ticked, also **complete section 6 below** and provide separate individual self-certification forms from each of the Controlling Persons)*	☐
	FI- Investment Entity resident in a Non-Participating Jurisdiction but is not managed by another Financial Institution/ Other Financial Institution *(including a Depository Financial Institution, Custodial Institution or Specified Insurance Company resident in a non-participating jurisdiction).*	☐
III	**Non-Reporting Financial Institution under CRS. (Specify the type of non-reporting FI below);**	

Government Entity	☐	International Organisation	☐
Central Bank	☐	Broad Participating Retirement Fund	☐
Narrow Participation Retirement Fund	☐	Pension Fund of a Government Entity/ International Organisation or Central Bank	☐
Exempt Collective Investment Vehicle	☐	Trust *(Who's trustee reports all required information with respect to all CRS reportable accounts)*	☐
Qualified Credit Card Issuer	☐	Qualified Non-Profit Entity	☐

Other Entity *(Defined under the domestic law as low risk of being used to evade tax).* ☐
Specify the type provided in domestic law:
_____

5.2 Non Financial Institutions ("NFE") under CRS:

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

Active Non-Financial Entity (NFE)	**(Choose the box that applies)**	
I.	**Active (NFE)-a corporation the stock of which is regularly traded on an established securities market** **Please provide details of the established securities market on which the corporation is regularly traded** _____	☐
II.	**Active (NFE) -if you are a Related Entity of a regularly traded corporation.** **Please provide the name of the regularly traded corporation of which the Entity is a Related Entity** _____ **And provide details of the securities market on which the corporation is regularly traded:** _____	☐
III.	**Active NFE-a Government Entity or Central Bank**	☐
IV.	**Active NFE-an International Organisation**	☐
V.	**Active NFE-Other than those listed in I,II,III, or IV above** ***For example a start-up or certain types of non-profit NFE's.***	☐

Or

Passive Non-Financial Entity (NFE)

VI.	***Passive (NFE)*** If this box is ticked please also complete **Section 6.1** for each of the Controlling Person(s) of the Entity and provide separate AEOI *"Individual (including Controlling Persons) Self-Certification for CRS and FATCA form*" as indicated in section 6.2 for each Controlling Person(s).	☐

Section 6: Controlling Persons

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

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

For further infrmation on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard. http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/

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

If you have ticked a Passive NFE with Controlling Persons in **either the FATCA or CRS Classification sections above or** An *Investment Entity* resident in a *Non-Participating Jurisdiction* and managed by another *Financial Institution* in the CRS section**,** then you must also complete this section for each of the Controlling Person(s) of the account holder and provide a separate *"Individual (including Controlling Persons) FATCA and CRS Self-Certification"* form for each Controlling person as per 6.2 below:

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

I.	

II.	
III.	
IV.	

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 for CRS purposes will be the natural person who holds the position of senior managing official of the Entity.

6.2 ***Arrange for each of the Controlling Persons listed in Section 6.1 to complete a separate "Individual (including Controlling Persons) Self-Certification for FATCA and CRS" form 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/We confirm (where applicable) that an ***"Individual (including Controlling Persons) Self-Certification for FATCA and CRS"*** form has been completed, signed and provided for **each Controlling person**, as defined under the CRS and FATCA regulations.

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

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

***Authorised Signature(s):**

_____

***Print Name(s):** _____

_____

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

_____ _____

***Date of signature: (dd/mm/yyyy):**

_____

7b. Individual (including Controlling Persons) Self-Certification for FATCA and CRS

Instructions for completion and Data Protection Notice

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (asamended) 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 and guidance on FATCA or CRS please refer to the Irish Revenue or OECD website at:
https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx
http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/ in the case of CRS only.

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

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

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

(Mandatory fields are marked with an *)

***Section 1: Account Holder/Controlling Person 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: _____

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City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

***Place and Date 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.

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

_____

OR

(b) ☐ I confirm that **I am not** a U.S. citizen or resident in the U.S. for tax purposes.

***Section 3: CRS Declaration of Tax Residency/ Residencies including Citizenship and Residency by Investment disclosure**

Please indicate your country of tax residence (if resident in more than one country please detail **All** countries of tax residence **and All** associated tax identification numbers ("TINs")).

For further guidance on Tax Residence and TINs, please refer to the OECD CRS Information Portal *http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759*

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

a) You are tax resident in a Jurisdiction that does not issue a TIN, **Or,**
b) You are tax resident **only** in a non-reportable Jurisdiction for CRS (i.e. Ireland or the USA)

Please list ALL Tax ID Numbers below

Country of Tax Residency	**Tax ID Number (or TIN equivalent)**	**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	☐	The Account Holder is otherwise unable to obtain a TIN *(Please explain why you are unable to obtain a TIN)* _____
Reason C	☐	No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

Please tick this box to confirm you have specified <u>all jurisdictions</u> in which you are resident for tax purposes. ☐

<u>3.1 Citizenship/Residency by Investment (CBI/RBI)</u>

Citizenship by Investment (CBI) and Residency by Investment (RBI) schemes are offered by a number of jurisdictions and allow foreign individuals to obtain citizenship or temporary/permanent residency rights based on local investments or against a flat fee. In this regard, the OECD have identified specific jurisdictions that operate CBI/RBI schemes which could potentially pose a high-risk to the integrity of CRS.

If, in this Section 3, you have confirmed that you are resident **only** in one or more of these specific jurisdictions (and not in any other jurisdiction), we are required to determine whether your citizenship/residency rights were obtained through a CBI/RBI scheme. If so, we must collect additional information.

For further details, including the list of jurisdictions and relevant CBI/RBI schemes, please refer to the OECD website: https://www.oecd.org/en/topics/sub-issues/international-standards-on-tax-transparency/residence-citizenship-by-investment.html

Please select <u>one</u> of the following options:

Option 1:

☐ I confirm that I am either **not resident** or **not solely resident** in one or more of the jurisdictions designated by the OECD as operating a CBI/RBI scheme that may pose a high risk to CRS integrity.
(If you select this box, no further information is required in this section – please proceed to Section 4, if applicable.)

Option 2:
☐ I confirm that I am **solely resident** in one or more of the jurisdictions designated by the OECD as operating a CBI/RBI scheme that may pose a high risk to CRS integrity but **<u>I did not</u>** receive my residence rights under a CBI/RBI scheme.***(If you select this box, no further information is required in this section – please proceed to Section 4, if applicable.)***

Option 3:
☐ I confirm that I am **solely resident** in one or more of the jurisdictions designated by the OECD as operating a CBI/RBI scheme that may pose a high risk to CRS integrity **and I solely obtained my residence rights** in these jurisdictions under one or more CBI/RBI schemes.

(If you select this box, please complete Section 3.2)

3.2 CBI/RBI additional queries where an Account holder or Controlling person has obtained citizenship or residency in an OECD CBI/RBI high risk jurisdiction.
(Additional questions to be completed <u>ONLY</u> where option 3 above has been ticked).

Do you hold residence rights in any other jurisdiction(s)?
No ☐

Yes ☐ *(If yes, list the jurisdiction(s))*

Have you spent more than 90 days in any other jurisdiction(s) during the previous year?

No ☐

Yes ☐ *(If yes, list the jurisdiction(s))* _____

In which jurisdiction(s) have you filed your personal income tax returns during the previous year?
(list the jurisdiction(s) below)

_____

Section 4 – Type of Controlling Person**

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

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

Controlling Person of a Legal Person	**Please Tick all that apply**	**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 (Please select all that apply)	**Please Tick all that apply**	**Entity Name**
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) Please select all that apply	**Please Tick all that apply**	**Entity Name**
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 and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

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

Data Protection - Customer Information Notice:

The Common Reporting Standard (CRS), formally referred to as the Standard for Automatic Exchangeof 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 -*https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx*

*Authorised Signature: _____

*Print Name: _____

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

*Capacity (if Controlling Person): _____

8. Return of Values (Investment Undertakings) Regulations 2013 (for Irish resident investors only)

Pursuant to the Return of Values (Investment Undertakings) Regulations 2013 (S.I. 245 of 2013) (the "Return Regulations"), the Sub-Fund is required to collect certain information from certain Irish residents. All applicants, whether individuals, bodies corporate or unincorporated bodies of persons, which are Irish resident or ordinarily resident should review the list of Exempt Irish Investors in the Prospectus. If the applicant is Irish resident or ordinarily resident and is not an Exempt Irish Investor, please provide the relevant Tax Identification Number (TIN) / PPS Number together with any one original or copy of the following additional documents: 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, or Public Services Card. In addition, printed documentation issued by the Irish Revenue Commissioners or the Department of Social Protection which includes the applicant's name, address and tax reference number is also acceptable. In the case of joint account holders, the additional documentation is required for each applicant. By signing this Account Opening Form the applicant acknowledges that information relating to its investment in Shares in the Sub-Fund, the value of such investment and its name(s), address(es) and tax reference / PPS number may be subject to disclosure to the Revenue Commissioners in accordance with the Return Regulations.

9. Investor AML Due Diligence Information (section must be completed by all applicants)

Anti-Money Laundering (AML) due diligence requirements in accordance with The Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 – 2021.

- Guide to completing due diligence.

Part I – To be completed by all applicants.

Part II – To be completed by all applicants.

Appendix III – All applicants to provide AML due diligence documentation outlined in Appendix III (as per investor type) in order to establish the identity of an investor and verify same to the extent warranted by risk. **AML documents must be provided in advance before an account can be opened.**

Due Diligence Information - Purpose of the Investment

Part I

Part I (A) to be completed only by natural persons and legal persons investing in their own name for their own benefit. Institutional investors and legal entities investing as part of their normal economic activity of investing in their own name for the benefit of one or more third parties must tick Part I (B). This information is required

to meet our AML obligations under the current AML legislation in Ireland and will be used solely for those purposes.

A. What is the expected annual subscription to the Fund
_____

How frequent do you expect to trade in the Fund (please tick):
Once-Off Subscription ☐

Once a: Month ☐ Quarter ☐ Year ☐

If more frequently than the options provided, please provide an estimate of frequency:
_____

Please indicate the term of your investment (please tick): 3-5 years ☐ 5-10 years ☐ 10+ years ☐

Natural Persons only:
Source of Wealth (activities that generated total net worth): _____

**Confirmation of Source of Wealth requires the Subscriber to confirm the bank account from which funds were generated as well as the specific activity that generated the funds subscribed (e.g. salary payments, sale of shares etc.)*

Source of Funds (activity that generated transaction funding): _____

**Confirmation of Source of Funds requires the Subscriber to confirm the activities that have generated the total net worth of the Subscriber with reasonable collaboration of same (e.g. information and documents such as evidence of title; copies of trust deeds; audited accounts and tax returns).*

B. Institutional investor/ legal entity investing as part of their normal economic activity of investing in their own name for the benefit of one or more third parties. If no, see Part 1 (A).

Yes ☐ No ☐

Due Diligence Documentation- Investor Type

Part II

Please tick investor type below (please note, investor type indicates the documents/ confirmations required to open account as per Appendix 6):

Private/ Unlisted Company	☐	Charities	☐
Partnership	☐	Trusts/ Foundations	☐

Listed Company	☐ Collective Investment Scheme/Fund	☐
Subsidiary of a Listed Company	☐ School, college or university	☐
Regulated Credit or Financial Institution	☐ Pension Schemes	☐
Nominee Company	☐ Trade Unions	☐
Government Body or Public Authority	☐ Church	☐
Individual	☐ Other- Please specify: _____	☐

Occupation/Business Activity:_____

If you, or any beneficial owners, are a Politically Exposed Person. Yes ☐ No ☐

A Politically Exposed Person ('PEP') means an individual (or family member or close associate of such individual) who is, or has, at any time in the preceding 12 months, been entrusted with a prominent public function (e.g. this can include but not limited to: head of state/ government, government / deputy minister, member of parliament, senior official of a political party or member of the supreme court).

If the application form is signed under power of attorney, a copy of the power of attorney must be furnished in support of the signature along with due diligence in line with legal type.

Due Diligence Documentation- Leverage Across Investments

I hereby authorize the Administrator to leverage the due diligence documentation provided for the purposes of compliance with applicable regulatory requirements across all investments which I currently hold/ may hold in the future across all funds which are administered by the Administrator.

Yes ☐ No ☐

Due Diligence Documentation- Ultimate Beneficial Owner

Please complete the relevant section to your entity type. The Ultimate Beneficial Owner section must be completed. Non-completion could delay acceptance of subscription.

All Entities

Ultimate Beneficial Owners are individuals who directly or indirectly hold ownership of 25% or more of the shares or voting rights in an entity, or control of the entity (including through Bearer Shareholdings), Where there is no person identified as beneficial owner, the natural person(s) who hold the position of senior managing official(s)/director(s) will be deemed the beneficial owners. Where the beneficial owner is the senior managing official, verify the identity of that person.

* In cases where shareholder(s) are entities with 25% or more ownership or control, please provide the details of Individual(s) who hold beneficial ownership 25% or more. For Trusts or similar arrangements,

Ultimate Beneficial Owners include the beneficiaries, the settlor, the trustee(s) and the protector (if any). The beneficiaries are the individuals benefiting from the trust or similar legal arrangement.

Please complete the below regarding Ultimate Beneficial Owner(s):

Name	Address	Nationality	Date of Birth

Note: If there is/ are no Individual(s) with a beneficial interest of 25% or more (either directly or indirectly) of the shares or voting rights of the entity, or anyone that otherwise exercises control of the entity (where applicable), please check the box and insert applicable senior managing official(s) below whom will be deeme☐ the UBO:

Name	Address	Nationality	Date of Birth

Related Person Detail

Full names of all Related Persons:

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

Please complete the below:

Name	Address	Nationality	Date of Birth

Declaration - I/We declare that the information contained in this form and the attached documentation, if any, is true and accurate to the best of my/our knowledge and belief.

Signature 1 _____ Print Name_____Date_____

Signature 2 _____ Print Name_____Date_____

10. Applicant Signatures	***Please sign***

Checklist prior to submission of the Account Opening Form to the Administrator (please tick (√) when complete where applicable)	
Section 1: Are all registration details completed in relation to an authorised contactee/agent?	
Section 2: Have all details been completed?	
Section 3: Are all dividend details included?	
Section 4: Have you completed the Declaration of residency form (to include the tax exempt declaration, where relevant) and completed and attached all relevant documentation?	
Section 5: Have you completed the Benefit Plan Investor section as applicable?	
Section 6: Have you read and understood the Representations, Authorities, and Indemnities section?	
Section 7a: Have you completed the FATCA and CRS form if completing on behalf of an entity?	
Section 7b: Have you completed the FATCA and CRS form if you are an individual investor?	
Section 8: Have you completed the Return of values (investment undertakings) section fully? (Irish resident investors only)	
Section 9: Have you completed the Investor AML Due Diligence Information section?	
Section 10: Have you fully signed and dated this Application Form?	
If applicable, have you attached supporting evidence for anti-money laundering purposes?	

I/we agree to be bound by the representations and statements set out in this Application Form. If applicable, attach an authorised signatory list of those entitled to instruct on this investment.

Signature	**Joint Applicant (if applicable) Signature**
Date	**Date**

APPENDIX I –SUBSCRIPTION FORM

This Application Form is for investors wishing to subscribe for additional shares in the Sub-Fund(s) indicated below.

The completed Subscription Form should be posted or sent by facsimile or email to the Administrator at the address below.

ADDRESS FOR DOCUMENTATION

Attention: Transfer Agency
c/o Northern Trust International Fund Administrators (Ireland) Limited
Georges Court
54-62 Townsend Street
Dublin 2, Ireland
T +353 1 4345124
F +353 1 4345285
E SkylineTAInstructions@ntrs.com

Share Class Name	Currency	Monetary Amount	Monetary Amount in words*	Number of Shares*
Class A USD$ Shares	USD			
Class A1 USD$ Shares	USD			
Class A2 USD$ Shares	USD			
Class B GBP£ Shares	GBP			
Class B1 GBP£ Shares	GBP			
Class C JPY¥ Shares	JPY			
Class C1 JPY¥ Shares	JPY			
Class CL USD $ Shares	USD			
Class D EUR€ Shares	EUR			
Class D1 EUR€ Shares	EUR			
Class E SGD$ Shares	SGD			
Class E1 SGD$ Shares	SGD			
Class F HKD$ Shares	HKD			
Class F1 HKD$ Shares	HKD			
Class G AUS$ Shares	AUS			
Class G1 AUS$ Shares	AUS			
Class H NZ$ Shares	NZ			
Class H1 NZ$ Shares	NZ			
Class B2 GBP£ Shares	GBP			
Class J NOK Shares	NOK			
Class K CHF Shares	CHF			
Class K1 CHF Shares	CHF			
Class WA GBP Shares	GBP			
Class WA USD Shares	USD			

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Share Class Name	Currency	Monetary Amount	Monetary Amount in words*	Number of Shares*
Class WA EUR Shares	EUR			
Class W1 GBP Shares	GBP			
Class W1 USD Shares	USD			
Class W1 EUR Shares	EUR			
Class W2 GBP Shares	GBP			
Class W2 USD Shares	USD			
Class W2 EUR Shares	EUR			
Class A4 USD$ Shares	USD			
Class CK USD$ Shares	USD			
Class D4 EUR€ Shares	EUR			
Class K4 CHF Shares	CHF			

***Please complete EITHER monetary amount/monetary amount in words OR number of shares**

The minimum initial subscription amounts are set out below:

Share Class Name		Minimum initial Investment Amount
Class A USD$ Shares	USD	US $100,000
Class A1 USD$ Shares	USD	US $100,000
Class A2 USD$ Shares	USD	US $100,000
Class B GBP£ Shares	GBP	GBP £75,000
Class B1 GBP£ Shares	GBP	GBP £75,000
Class C JPY¥ Shares	JPY	JPY ¥15,000,000
Class C1 JPY¥ Shares	JPY	JPY ¥15,000,000
Class CL USD$ Shares	USD	US $100,000
Class D EUR€ Shares	EUR	EUR €85,000
Class D1 EUR€ Shares	EUR	EUR €85,000
Class E SGD$ Shares	SGD	SGD $130,000
Class E1 SGD$ Shares	SGD	SGD $130,000
Class F HKD$ Shares	HKD	HKD $780,000
Class F1 HKD$ Shares	HKD	HKD $780,000
Class G AUS$ Shares	AUS$	AUS $150,000
Class G1 AUS$ Shares	AUS$	AUS $150,000
Class H NZ$ Shares	NZ$	NZ $170,000
Class H1 NZ$ Shares	NZ$	NZ $170,000
Class B2 I GBP£ Shares	GBP	GBP £75,000
Class J NOK Shares	NOK	NOK 990,000
Class K CHF Shares	CHF	CHF 80,000
Class K1 CHF Shares	CHF	CHF 80,000
Class WA GBP Shares	GBP	GBP £75,000
Class WA USD Shares	USD	US $100,000
Class WA EUR Shares	EUR	EUR €85,000
Class W1 GBP Shares	GBP	GBP £75,000
Class W1 USD Shares	USD	US $100,000
Class W1 EUR Shares	EUR	EUR €85,000
Class W2 GBP Shares	GBP	GBP £75,000
Class W2 USD Shares	USD	US $100,000
Class W2 EUR Shares	EUR	EUR €85,000

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Share Class Name		Minimum initial Investment Amount
Class A4 USD$ Shares	USD	US $5,000
Class CK USD$ Shares	USD	US $100,000
Class D4 EUR€ Shares	EUR	EUR €5,000
Class K4 CHF Shares	CHF	CHF 5,000

Signature:	**Signature:**
Print name:	**Print name:**

Position (only if signing on behalf of the beneficial owner)

Date: / / **Date: / /**

Please complete in Full

Cleared subscription monies must be received no later than 3:00pm (Irish time) on the **third Business Day following the relevant Dealing Day**.

If payment in full in cleared funds is not received within the required number of Business Days any provisional allotment of shares may be cancelled.

Please note any subscription proceeds paid in currencies other than the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share 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: Currency subscription settlement times

- *GBP 16:00 GMT*
- *EURO 14:30 GMT*
- *USD 16:00 GMT*
- *NOK 11:30 GMT*
- *CHF 11.00 GMT*
- *JPY 14:30 GMT value date -1*

Bank account details for USD Subscription Payments
Pay subscription monies in USD to the following bank account:

U.S. Dollar
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
SWIFT: CNORUS33
Fedwire ABA: 026001122
CHIPS ABA: 0112
Beneficiary: Skyline Umbrella Fund ICAV - 179481-20010
Reference: * ARGA Emerging Market Equity Fund

Bank account details for EUR Subscription Payments

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Pay subscription monies in EUR to the following bank account:

Euro – EUR
Intermediary Bank: Barclays Bank PLC, Frankfurt
SWIFT: BARCDEFF
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
SWIFT: CNORUS33
Account Number: 0210472800
Beneficiary: Skyline Umbrella Fund ICAV - 662452-20019
Reference: * ARGA Emerging Market Equity Fund

Bank account details for GBP Subscription Payments

Pay subscription monies in GBP to the following bank account:

British Pound - GBP
Intermediary Bank: Barclays Bank PLC, London
SWIFT: BARCGB22
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
GBP Sort Code: 203253
Account Number: 53529495
SWIFT: CNORUS33
Beneficiary: Skyline Umbrella Fund ICAV 664482-20019
Reference: *Contract number

Bank account details for NOK Subscription Payments

Pay subscription monies in NOK to the following bank account:

Norwegian Kroner – NOK
Intermediary Bank: DNB Bank ASA, Oslo
SWIFT: DNBANOKK
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
Account Number: 70010241705
SWIFT: CNORUS33
Beneficiary: Skyline Umbrella Fund ICAV 663120-20019
Reference: *Contract number

Bank account details for CHF Subscription Payments

Pay subscription monies in CHF to the following bank account:

Swiss Franc – CHF
Intermediary Bank: UBS Switzerland AG, Zurich
Intermediary SWIFT Code: UBSWCHZH80A
Beneficiary IBAN: CH5900230230079459O5X
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
Beneficiary Bank SWIFT code: CNORUS33
Beneficiary account name & number: Skyline Umbrella Fund ICAV 662510-20019
Reference: *Contract number

Bank account details for JPY Subscription Payments

Pay subscription monies in JPY to the following bank account:

Japanese Yen - JPY
Intermediary Bank: Bank of America, NA, Tokyo
Intermediary SWIFT Code: BOFAJPJX
Beneficiary Account Number: IBAN: 50234015
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey

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Beneficiary Bank SWIFT code: CNORUS33
Beneficiary account name & number: Skyline Umbrella Fund ICAV 680785-20019
Reference:

REGISTERED INFORMATION

Registered Account Name	
Account Number[1]	
Your Company Contact	Name: Phone No: E-Mail Address:

[1] Please note you would have received this by email from the Administrator

APPENDIX II – REDEMPTION FORM

This Application Form is for client(s) redeeming Shares from the Sub-Fund(s) below.

This completed Redemption Form should be posted or sent by facsimile or email to the Administrator at the address below no later than the Dealing Deadline. Redemptions will not be processed on non-cleared/verified accounts.

ADDRESS FOR DOCUMENTATION

Attention: Transfer Agency
c/o Northern Trust International Fund Administrators (Ireland) Limited
Georges Court
54-62 Townsend Street
Dublin 2, Ireland
T +353 1 4345124
F +353 1 4345285
E SkylineTAInstructions@ntrs.com

Please see the Prospectus for full details of how to apply for a redemption of shares.

Any redemption request which would reduce the value of your aggregate shareholding below the Minimum Subscription amounts specified in the Prospectus may be refused or may result in the redemption of all of your shares.

It should be noted that any outstanding unpaid interest that you owe, arising due to late settlement of subscription monies, may be deducted from the redemption proceeds.

Redemption monies for the Classes of Shares in the ICAV will be remitted in the designated currency of the Class of Shares (or such other currency as the Directors may from time to time determine).

I/We, having received and read a copy of the Prospectus and Instrument of Incorporation of the ICAV wish to redeem Shares in the ICAV as indicated in the table below:

Share Class Name	Currency	Monetary Amount	Monetary Amount in words*	Number of Shares*
Class A USD$ Shares	USD			
Class A1 USD$ Shares	USD			
Class A2 USD$ Shares	USD			
Class B GBP£ Shares	GBP			
Class B1 GBP£ Shares	GBP			
Class C JPY¥ Shares	JPY			
Class C1 JPY¥ Shares	JPY			
Class CL USD $ Shares	USD			
Class D EUR€ Shares	EUR			
Class D1 EUR€ Shares	EUR			
Class E SGD$ Shares	SGD			
Class E1 SGD$ Shares	SGD			
Class F HKD$ Shares	HKD			
Class F1 HKD$ Shares	HKD			
Class G AUS$ Shares	AUS			
Class G1 AUS$ Shares	AUS			
Class H NZ$ Shares	NZ			

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Share Class Name	Currency	Monetary Amount	Monetary Amount in words*	Number of Shares*
Class H1 NZ$ Shares	NZ			
Class B2 GBP£ Shares	GBP			
Class J NOK Shares	NOK			
Class K CHF Shares	CHF			
Class K1 CHF Shares	CHF			
Class WA GBP Shares	GBP			
Class WA USD Shares	USD			
Class WA EUR Shares	EUR			
Class W1 GBP Shares	GBP			
Class W1 USD Shares	USD			
Class W1 EUR Shares	EUR			
Class W2 GBP Shares	GBP			
Class W2 USD Shares	USD			
Class W2 EUR Shares	EUR			
Class A4 USD$ Shares	USD			
Class CK USD$ Shares	USD			
Class D4 EUR€ Shares	EUR			
Class K4 CHF Shares	CHF			

*** Please complete EITHER monetary amount/monetary amount in words OR number of shares**

Payments will be made by default to the details provided at the time of registration. If these details have changed please complete the following and contact the Administrator.

Bank Details (for the purposes of receiving redemption monies):

Bank Name:	
Branch Name:	
IBAN:	
BIC:	
Account Name:	
Account Number:	
Sort Code:	

A request to change bank account details MUST BE ACCOMPANIED by a bank statement or banker's reference to evidence the new bank account details provided are for a bank account registered account name.

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I/we acknowledge and agree that if all of the relevant anti-money laundering ("**AML**") information and Tax information requested under Application Form has not been supplied to the Administrator, that my/our shareholding will be redeemed but that the related monies will be held by the Administrator until such documentation requested has been supplied.

Signature:	**Signature:**
Print name:	**Print name:**

Position (only if signing on behalf of the beneficial owner)

Date: / / **Date: / /**

APPENDIX III – INVESTOR AML DUE DILLIGENCE DOCUMENTATION REQUIREMENTS (all investors- provision in advance)

Outlined below is guidance on the documentation which the Fund/ICAV/ Manager & Northern Trust (as Administrator) will require when undertaking due diligence to establish the identity of an investor and verify same to the extent warranted by risk. **AML documents must be provided in advance before an account can be opened.**

The Fund/ICAV/ Manager & Northern Trust (as Administrator) hereby reserves the right to request such further information and/or documentation from investors as is necessary from time to time to satisfy Irish regulatory requirements.

Examples of Photographic Identity Documentation

- Current passport.
- Current driving licence.
- Current national identity card.
- Identity document with photographic identity issued by a government department.

Examples of Proof of Address

- Bank statements/credit card statements.
- Utility bill.
- Household/motor insurance certificate and renewal notices.
- Correspondence from local authorities.
- Correspondence from the revenue commissioners or equivalent.
- Correspondence from any government body.
- Driving licence which confirms the address provided it has not also been used to satisfy the photographic identity requirement above.
- Payslip or salary advice dated within the previous 6 months.
- Confirmation of address from a lawyer or financial institution.

Note 1: All documentation must reflect the current residential address and must be dated within the previous 6 months other than in the case of an official document known to be issued only or typically at fixed intervals of more than 6 months, in which case such document may be accepted during that period, to a maximum of 12 months (e.g. correspondence from local authorities).

Note 2: In the case of an elderly individual investor residing in a residential home, then written confirmation from the residential home, (identified as being in existence), that the individual is residing there will be deemed sufficient.

Note 3: A mobile phone bill can only be accepted as a second Proof of Address.

Note 4: The photograph on the proof of identity should be clear

Certification of Documents – Required for High Risk countries

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

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

Suitable persons include:

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

Certification of each document should include:

- A signed statement confirming that this document is a true and accurate copy of the original document as seen by the person certifying the document.
- The name (in block capitals), occupation and contact details (address, telephone number and email address) of the person certifying the document, as a true copy of the original document.
- The date of certification of the document, as a true copy of the original document.

Note 1: Where the document, being certified as a true copy of the original document, contains a photograph, the person certifying the document as a true copy should also confirm that this a true likeness of the person named in the document.

Note 2: For multiple page documents, the certifier should sign or initial each page of the copy and confirm on the first or last page of the document the actual number of pages in the document.

Note 3: Where available, the statement of certification as a true copy of the sighted original should be accompanied by the professional stamp or seal of the certifier.

Note 4: When certifying documents as true copies, the certifier should not be a close family member of, or have any apparent or potential conflicts of interest with, the investor. For the avoidance of doubt, an internal person to the investor stated as acting in his/her professional capacity (e.g. in-house legal counsel) will be deemed acceptable in relation to the certification of a document as a true copy of the original document

Note 5: At time of submission, certification must be dated within the last 6 months.

English Translations

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

Letter of Assurance

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

For Unregulated Nominees (of a regulated parent) or Regulated Financial Intermediary investors, please see templates below (appendix 6.1).

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

Country Risk Ratings

NTIFASIL applies enhanced due diligence to investors located in a country identified as a high risk third country by the EU.

Regulated Credit or Financial Institution

Where the applicant is a Regulated Credit or Financial Institution in an Equivalent Jurisdiction, please provide the following:

1. Proof of regulation.
2. A letter of assurance from the Regulated Credit or Financial Institution.
3. Identify any beneficial owner entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, then the natural person(s) who hold the position of director(s) of the entity must be identified (along with address, date of birth and nationality).
4. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Where the applicant is a Regulated Credit or Financial Institution but is not regulated in an Equivalent Jurisdiction, please provide the following:

1. Full name of the company
2. Registered number of the company
3. Registered office address & principal business address of the company,
4. Details of directors of the company and verify the identity of two directors, or where applicable, one director and one authorised signatory.
5. Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified.
6. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
7. Evidence of UBO registration on the Beneficial Ownership Register (EU investors only)

Note: Where the beneficial owner is a corporate entity, Northern Trust requires details of ultimate beneficial

owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc. reflecting the direct and/ or indirect ownership and control structure).

8. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors; and (as applicable) identify and verify any beneficial owner entitled to 25% or more of the investment.

Note: Where the beneficial owner of the investment or the company is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form.

9. Verification of identity of the company from:

    - Extract from the relevant company registry; or
    - Copy of the Certificate of Incorporation or equivalent of the company; or
    - Copy of the Memorandum and Articles of Association or equivalent of the company; or
    - Copy of the latest audited financial statements of the company.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required

10. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the company. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity must be identified and verified.
11. Due diligence Questionnaire (incl. SOW/SOF for investor and UBO).
12. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify and verify the identity of any beneficial owner entitled to 10% or more of the investment.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Nominee Company

Where the applicant is a Regulated Nominee Company from an Equivalent Jurisdiction, please provide the following:

1. Proof of regulation.
2. A letter of assurance from the regulated nominee company
3. Identification and verification (to the extent warranted by risk) of beneficial ownership for the financial intermediary/nominee (ensuring that where no natural person is identifiable who ultimately owns or controls the financial intermediary/nominee, Funds may consider the senior managing official(s) to be the beneficial owner(s)).
4. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only)

Where the applicant is 1) not directly regulated and 2) a wholly owned subsidiary of a regulated parent entity (in an Equivalent Jurisdiction), please provide the following:

1. Identification and verification of the financial intermediary/nominee entity, in accordance

with a Fund's identification and verification requirements per legal form of that entity.

2. Identification and verification (to the extent warranted by risk) of underlying investor(s) as the beneficial owner(s) of the funds invested.
3. Authorised Signatory List
4. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
5. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors.
6. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

7. Identification and verification of the financial intermediary/nominee entity, in accordance identification and verification requirements per legal form of that entity;
8. Identification and verification of underlying investor(s)as the beneficial owner(s) of the funds invested.
9. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO).
10. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify and verify the identity of any beneficial owner entitled to 10% or more of the investment.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Listed Company

Where the applicant is a Listed Company on a regulated market (E.g. a regulated market that subjects companies, whose securities are admitted to trading, to disclosure obligations which are consistent with the Legislation of the European Communities), please provide the following:

1. Please provide proof of listing on an equivalent market.
2. Entity name
3. Company registration number
4. Registered office address
5. Principle Business address

Where the applicant is not a Listed Company on a regulated market, please provide the following:

1. Proof of listing of the company.
2. Full name of the company.
3. Registered number of the company.
4. Registered office address & principal business address of the company.
5. Details of directors to include name, address, date of birth
6. Identify and verify any beneficial owner beneficially entitled to 25% or more.
7. Identify and verify two senior managing officials (usually director
8. Receive confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors.
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Note: Where the beneficial owner of the investment or the company is deemed high risk, the identity should be verified in line with its legal form.

10. **In addition** to proof of listing on a stock market obtain one of the following:
    - Search of the relevant company registry; or
    - Copy of Certificate of Incorporation or equivalent; or
    - Copy of Memorandum and Articles of Association or equivalent; or
    - Copy of latest audited financial statements.

Note: Where the beneficial owner of the investment or the company is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

11. Proof of listing of the company
12. Full name of the company.
13. Registered number of the company.
14. Registered office and principal business address of the company.
15. Certificate of Incorporation or Equivalent.
16. Copy of Memorandum and Articles of Association.
17. Latest audited financial statement.
18. Details of directors of the company: Name, address, date of birth
19. Identify and verify two directors
20. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity.
21. Due diligence Questionnaire (incl. SOW/SOF for investor and UBO)
22. Receive confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify and verify the identity of any beneficial owner entitled to 10% or more of the investment

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Subsidiary of a Listed Company

Where the applicant is a Subsidiary of a Listed Company on a regulated market (E.g. a regulated market that subjects companies, whose securities are admitted to trading, to disclosure obligations which are consistent with the Legislation of the European Communities), please provide the following:

1. Proof of listing for the parent
2. Legal name of the entity.
3. Evidence of ownership by the listed company.
1. Identify the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity (along with address, date of birth and nationality).
4. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Where the parent company is not a Listed Company on a regulated market, please provide the following:

1. Legal name of the entity
2. Registered number of the subsidiary company.
3. Registered office address & principal business address of the subsidiary company.
4. Proof of listing of the parent company

5. Independent evidence of ownership by the company listed on a stock market.
6. Name, address and date of birth for all directors of the subsidiary company..
7. Verify two directors.
8. Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity.
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only)

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

11. Receive confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify and verify any beneficial owner entitled to 25% or more of the investment.

Note: Where the beneficial owner of the investment or the subsidiary company is deemed high risk, the identity should be verified in line with its legal form.

1. Verification of identity of the company from:

- Extract from the relevant company registry or
- Copy of the Certificate of Incorporation or equivalent of the company; or
- Copy of the Memorandum and Articles of Association or equivalent of the company; or
- Copy of the latest audited financial statements of the company.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

12. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the company. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity must be identified and verified.
13. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)
14. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify and verify the identity of any beneficial owner entitled to 10% or more of the investment.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Government / Public Body

Where the applicant is a Government/ Public Body in Ireland, please provide the following:

1. Appropriate background information sourced from a reliable source (e.g. copy of the legal instrument establishing the government body/public authority and listing the names of key officials).
2. Entity legal name
3. Nature and status of entity
4. Registered office address of the entity
5. Name of the home state authority and nature of its relationship with public body.

6. Ownership/Gov. Dept. accountable for the entity.
7. Name of main public body officials/directors (or equivalent)

Where the applicant is <u>not</u> a Government Body or Public Authority in Ireland, please provide the following:

1. Full name of the government body or public authority.
2. Nature and status of the government body or public authority.
3. Registered office address.
4. Name of the home state of the public authority and details of the nature of its relationship with the public authority.
5. Evidence of ownership of the public authority.
6. Names of the main officials of the government body or public authority and where the country is deemed medium risk by Northern Trust verify the identity of two officials or, where applicable, one official and one authorised signatory.
7. Appropriate background information on the government body or public authority.
8. Ownership/Gov. Dept. accountable for the entity.
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

10. Identify and verify the identity the position of senior managing official(s) of the entity and evidence of authorisation to act on the customer's behalf.
11. Certified copy of the audited financial statements of the government body or public authority.
12. Due Diligence Questionnaire (incl. SOW/SOF for investor).

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

<u>Pension Scheme</u>

Where the applicant is an Employee/Superannuation or similar scheme in an Equivalent Jurisdiction, please provide the following confirmations

1. Confirmation that the Employee/Superannuation (or similar scheme) provides for retirement benefits to employees.
2. Confirmation that contributions of the Employee/Superannuation scheme are made by deduction from wages.
3. Confirmation that the rules of the Employee/ Superannuation scheme do not permit a member's interest under the scheme to be re-assigned.

Note: The above can be confirmed through constitutional documentation of the scheme or through receipt of written confirmation from the trustees of the scheme.

Alternatively,

- Listed by EIOPA or equivalent - HMRC Cert obtained from the investor satisfies this requirement for UK based pensions

-OR-

- Obtain Trust Deed or equivalent which confirms that the entity is a pension or similar scheme which provide retirement benefits to employees
- Identify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity.
- Where there is no beneficial owner entitled to 25% or more the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity must be identified.

Where the applicant is not an Employee/ Superannuation or similar scheme in an Equivalent Jurisdiction, please provide the following:

1. Full name of the pension scheme.
2. Registered office address of the pension scheme
3. Confirmation of listing by EIOPA or equivalent HMRC Cert obtained from the investor satisfies this requirement for UK based pensions.
4. Identify controllers/trustees/ directors/
5. Verify two trustees/directors/controllers
6. Constitutional/Formation Document (e.g. Trust Deed)
7. Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity.
8. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

9. Identify and verify the identity of the scheme administrator and entity carrying out AML/CTF controls on scheme investors (per legal form); or
10. Receive written confirmation from the entity carrying out AML/CTF controls similar to that requested from a regulated third party undertaking due diligence.
11. Identify any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified and verified.
12. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Collective Investment Scheme

Where the applicant is a Collective Investment Scheme ('CIS') regulated as a designated person or listed on a regulated financial market in an Equivalent Jurisdiction, please provide the following:

1. Please provide proof of regulation/ listing.
2. Full name of the CIS.
3. Registered address of the CIS.
4. Prospectus or equivalent.
5. Name and address of scheme promoter.

6. Name and address of scheme administrator.
7. Name and address of entity carrying out anti-money laundering checks upon the scheme investors and evidence that the entity is regulated for AML purposes.
8. Identify any investors (beneficial owners) who own 25% or more (directly or indirectly) of the share capital.
9. Identify SMOs
10. Beneficial Owner Form
11. AML Comfort letter from the entity carrying out AML checks whom NTIFASIL is entitled to place reliance on
12. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Where the CIS is <u>not</u> either listed on a regulated financial market or regulated as a designated person in an Equivalent Jurisdiction, please provide the following:

1. Full name of the CIS.
2. Registered address of the CIS.
3. Prospectus or equivalent.
4. Name and address of the scheme promoter.
5. Name and address of the scheme administrator.
6. Name and address of the entity carrying out anti-money laundering checks upon the scheme investors and evidence that this entity is regulated for AML purposes. Identify and verify any investors (beneficial owners) who own 25% or more (directly or indirectly) of the share capital.
7. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity (investor) must be identified and verified.
8. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice
9. AML Comfort letter from the entity carrying out AML checks whom NTIFASIL is entitled to place reliance on
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Note: Where the beneficial owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

11. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)
12. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity;

    or
13. Written confirmation from the entity carrying out AML/CTF controls similar to that requested from a regulated third party undertaking due diligence.
14. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Individuals (including Joint Account Holders)

Where the applicant is an Individual, please provide the following documentation:

1. Photographic identity document.
2. Proof of address.
3. Source of wealth and source of funds. In general e-mail confirmation or completion of the relevant section of the app will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

4. Due Diligence Questionnaire (incl. Source of Funds and Source of Wealth). Documentary evidence may be required for high risk investors.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

In the case of joints account holders, please provide documents in respect of all holders.

Private and Unlisted Company

Where the applicant is a Private Company/ Company not listed on a regulated financial market, please provide the following:

1. Full name of the company.
2. Registered number of the company.
3. Registered office address & principal business address of the company.
4. Verification of identity of the company from:
   - Extract from relevant company registry or
   - Certificate of incorporation or
   - Copy of Mem & Arts or
   - Copy of latest audited financial statement
5. List of directors including name, date of birth and address for all directors
6. Verify the identity of at least two directors or, where applicable, one director and one authorised signatory (i.e. for each, one copy of a photographic identity document and one copy Proof of Address) .
7. Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity (investor) must be identified.
8. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
9. Confirmation of source of wealth and source of funds. In general email confirmation or completion of the relevant section of the app form will suffice

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

Note: Where the beneficial owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

10. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ director(s) of the entity must be identified and verified.
11. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Limited Liability Company

Where the applicant is a Limited Liability Company (LLC), please provide the following:

1. Full name of the LLC.
2. Registered office address & principal business address of the LLC.
3. Constitutional document (e.g. certificate of formation) or Operating agreement
4. Identify all managing members (name, date of birth and address)
5. Verify the identity of at least two managing members or, where applicable, one managing member and one authorised signatory.
6. Identify and verify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified.
7. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
8. Confirmation of source of wealth and source of funds. In general email confirmation or completion of the relevant section of the app form will suffice

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

Note: Where the beneficial owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

9. Identify and verify the identity of any beneficial owner beneficially entitled to 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/ managing members(s) of the entity must be identified and verified.
10. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be

certified in-line with NTIFASIL standards.

Partnership

Where the applicant is a Partnership, please provide the following:

1. Full name of the partnership.
2. Registered office address & principal business address of the partnership.
3. Identify all partners (name date of birth, address) (where practical)
4. Or, if a Partnership Fund, names and address and date of birth of General Partner and partners who own more than 25% of the shares, profit or voting rights and listing of directors if appropriate.
5. Constitutional document (e.g. Partnership Agreement)
6. Verify the identity of all partners who own 25% or more (directly or indirectly) of the partnership capital, profit or voting rights or otherwise exercise control over the management of the Partnership Fund. Where there is no partner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified.
7. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
8. Verify the identity of the general partner and a second partner (or in the absence of same an authorised signatory).
9. Evidence of UBO Registration on the Beneficial ownership Register (EU investors only).

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

Where the applicant is not a Partnership Fund or located in a high risk jurisdiction, the following is also required:

10. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO).
11. Identify and verify the identity of any partner who own 10% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the partnership. Where there is no partner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/partner(s) must be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Trust

Where the applicants are Regulated Trustees investing on behalf of a Trust or similar entity, please provide the following (only applicable for Trustees not located in a high risk jurisdiction):

1. Full name of trust.
2. Country of establishment of trust.
3. Legal form of the trust.
4. Trust deed or equivalent or confirmation of the trust etc. by reference to an appropriate register.
5. Confirmation of the nature/purpose of the trust.

6. Identify all Trustees and verify the identity of at least two trustees where applicable.
7. Identify and verify the settlor.
8. Identify and verify the protector.
9. Identify all beneficiaries or the class of beneficiary beneficially entitled to trust's assets or the beneficial interest (Note: Verification of the beneficiaries will only be required where payment is made directly to the beneficiary) .
10. Verify the identity of the beneficiaries to the extent warranted by risk. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified.
11. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only). Confirmation of source of wealth and source of funds. In general email confirmation or completion of the relevant section of the app form will suffice

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

Where the applicants are domiciled in a high risk jurisdiction, the following is also required:

12. Confirmation as to how the settlor was in a position to make the investment.
13. Due Diligence Questionnaire (incl. SOW/SOF for investor and settlor)
14. Verify the identity of all trustees (i.e. in accordance with their legal structure)
15. Identify all beneficiaries or identify the class of beneficiaries.
16. Verify the identity of the beneficiaries beneficially entitled to trust's assets or beneficial interest, where practicable.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Foundation

Where the foundation is a registered charity please refer to charity requirements.

Where the applicant is evidenced to be a local or community based foundation in another deemed low or medium risk country please provide the following:

1. Full name of the foundation.
2. Registered address of the foundation.
3. Consider the legal form of the Foundation.
4. Constitutional documents equivalent **OR** confirmation of the foundation by reference to an appropriate register.
5. Identify and verify the founder, where practical,
6. Nature/purpose of the foundation.
7. Identify all trustees, and verify the identity of two trustees, where applicable. Where the trustee is regulated proof of regulation should be placed on file.
8. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
9. Identify and verify any beneficiary beneficially entitled to 25% or more of the foundation's assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity should be identified.
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

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

control structure).

Where the applicants are domiciled in a high risk jurisdiction, the following is also required:

11. Verify the identity of two trustees authorised to operation on behalf of the foundation or, where applicable, one officer and one authorised signatory.

    Where there are a large number of trustees, consideration will be given as to whether more than two trustees need to be verified (e.g. where additional risk factors have been identified)

12. Confirmation of the funding of the foundation.
13. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)
14. Identify and verify the identity of the beneficiaries who hold 10% or more of the beneficial interest. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity should be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Charity

Where the applicant is a registered Charity, please provide the following:

1. Full name of the charity.
2. Nature/purpose of the charity
3. Nature and source of funding of the charity
4. Registered office address & principal business address of the charity.
5. Constitutional / Formation document (e.g. bye-laws or other governing document)
6. Name, address and date of birth of all trustees/directors/board members/governors (or equivalent) of the charity.
7. Identify and verify the company secretary or equivalent or, where applicable, verify the identity of one of the trustees.
8. (If a charitable trust), details of the settlor of the charitable trust.
9. Identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified and verified.
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
11. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
12. Complete a check of the relevant charities register or source confirmation of the registration of the charity with the relevant tax authorities (e.g. UK Charities Commission/ HMRC/Guidestar).

Where the applicant is not a registered Charity or where the applicant is domiciled in a high risk jurisdiction, the following is also required:

13. Verify the identity of two trustees authorised to operation on behalf of the charity or, where applicable, one officer and one authorised signatory.

    Where there are a large number of trustees, consideration will be given as to whether more than two trustees need to be verified (e.g. where additional risk factors have been identified).
14. Certified copies of the audited financial statements.
15. Certified constitutional/ formation document of the charity.

16. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO (if applicable), and jurisdictions funds are received from and paid to where not already evident).
17. Identify and verify the identity of the beneficiaries (where ascertainable) of the charity. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified and verified.
18. Identify and verify the settlor, where applicable

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Club or Society

Where the applicant is a Club or Society, please provide the following:

1. Full name of the club/society.
2. Registered office address of the club/society.
3. Confirmation of the legal status of the Club/Society.
4. Nature/Purpose including the nature of funding of the club/society.
5. Constitutional/Formation Document (e.g. Trust Deed) and/or copy of audited financial statements (if available) or complete a check of a relevant register (i.e. FCA or the Mutuals Public Register in the UK).
6. List of officers of the club/society including name, date of birth and address
7. Verify the identity of two officers of the Club/Society authorised to operation on behalf of the club/society or, where applicable, one officer and one authorised signatory.
8. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
9. Identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified and verified.
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

11. Verify the identity of two officers of the Club/Society authorised to operation on behalf of the club/society or, where applicable, one officer and one authorised signatory.

    Where there are a large number of officers, consideration will be given as to whether more than two officers need to be verified (e.g. where additional risk factors have been identified)

12. Certified copies of audited financial statements.
13. Certified constitutional/ formation document of the club/society
14. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)
15. Identify and verify the identity of all persons who own or control 10% or more of the entity's share capital, profit or voting rights. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

School, College or University

Where the applicant is a School, College or University, please provide the following:

1. Full name of the School, College or University.
2. Registered address of the School, College or University.
3. Verify the identity of the school etc. by checking with relevant registers and/or obtaining appropriate background information e.g. via internet search.
4. Identify main officials of the school including name, date of birth and address.
5. Identify and verify the identity of at least two officials or, where applicable, one official and one authorised signatory.
6. Obtain details of ownership of the entity. In particular, determine if in public ownership or independent. Where independently owned, identify and verify all persons who own or control 25% or more of the entity's share capital, profit or voting rights. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified and verified.
7. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
8. Identify and verify the settlor, where applicable.
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

10. Identify and verify the identity of all persons who own or control 10% or more of the entity's share capital, profit or voting rights. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified and verified.
11. Identify and verify the identity of at least two officials or, where applicable, one official and one authorised signatory.

    Where there are a large number of officials, consideration will be given as to whether more than two officials need to be verified (e.g. where additional risk factors have been identified).
12. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO/Settlor)

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Church

Where the applicant is a Church, please provide the following:

1. Full name of the Church.
2. Registered office address & principal business address of the church.
3. Nature/purpose of the church including the nature of the funding of the church.
4. Complete a check of a relevant church register or source a copy of the revenue approval for the church;
5. Name, address and date of birth of all trustees/directors/governors/board member of the church.

6. Identify and verify the identity of the church secretary or equivalent or, where applicable, verify the identity of one of the trustees.
7. Identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified and verified.
8. Identify and verify the settlor where applicable.
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.
10. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

11. Certified copies of audited financial statements for the church.
12. Identify and verify the identity of at least two officials or, where applicable, one official and one authorised signatory.

    Where there are a large number of trustees consideration will be given as to whether more than two trustees needs to be verified (e.g. where additional risk factors have been identified).
13. Certified constitutional/formation document of the church.
14. Due Diligence Questionnaire (incl. SOW/SOF for investor and settlor if applicable).
15. Identify and verify the beneficiaries (where ascertainable) of the church. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

Trade Union

Where the applicant is a Trade Union, please provide the following:

1. Full name of the Trade Union.
2. Registered address of the trade union.
3. Establish whether the trade union is registered or otherwise listed by a controlling body for regulatory or oversight purposes (e.g. Congress of Trade Unions).
4. Names or classes of persons who stand to benefit from the Trade Union: or identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified.
5. Evidence of UBO Registration on the Beneficial Ownership Register (EU investors only).
6. Consider the legal form of the trade union, its stated purpose, aims and objectives using information from documents supplied for the trade union and through internet searches.
7. Deed or equivalent establishing the existence of the trade union (for example its constitution, bye-laws, rules).
8. Identify and verify all persons who are empowered to make the investment on behalf of the trade union (president, secretary, treasurer and other senior committee members).
9. Confirmation of source of wealth & source of funds. In general email confirmation or completion of the relevant section of the app form will suffice.

Where the applicant is domiciled in a high risk jurisdiction, the following is also required:

10. Identify and verify the identity of at least two senior committee members of the trade union. Where there are a large number of officials, consideration will be given as to whether more than two officials need to be verified (e.g. where additional risk factors have been identified).
11. Due Diligence Questionnaire (incl. SOW/SOF for investor)
12. Identify and verify the identity of all persons who own or control 10% or more of the entity's share capital, profit or voting rights. Where there is no beneficial owner entitled to 10% or more, the natural person(s) who hold the position of senior managing official(s) of the entity must be identified and verified.

All investor supplied documents for high risk applicants (except the due diligence questionnaire) to be certified in-line with NTIFASIL standards.

APPENDIX 3.1 LETTERS OF ASSURANCE REQUIREMENTS (PROVISION IN ADVANCE)- UNREGULATED NOMINEES AND REGULATEDCREDIT OR FINANCIAL INSTITUTION

Unregulated Nominee Letter of Assurance

[On Letterhead of the Regulated Parent Company]

[Date]

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

Re: ***[Insert Name of Unregulated Nominee/ Intermediary Company]*** **('the Nominee Company')-** Verification of Investor(s) Identity in accordance with applicable Anti Money Laundering and Counter Terrorist Financing ("AML/CFT") Laws and Regulations[6]

Dear Sir/ Madam,

We confirm that, ***[insert name of Regulated Parent Company] (the "Parent Company")*** with a registered office located at _____ ***[insert address]*** is licensed as _____ ***(insert description)*** by the _____***[insert regulatory body]*** and that we are supervised and monitored for compliance with AML/CFT regulatory requirements in _____***[insert country]***. Our registration or licence number is _____**[insert registration or licence number]**.

We confirm that the ***Nominee Company*** is a wholly owned subsidiary of ***the Regulated Parent Company.***

We are satisfied for Northern Trust International Fund Administration Services (Ireland) Limited (as administrator to funds) to rely on this confirmation for all designations where the above referenced Nominee Company has holdings.

[6] Please complete the Declaration of Beneficial Ownership below.

The Regulated Parent Company make the following representations, warranties and undertakings in respect to both the Nominee Company and the Parent Company:

i. we have established AML/CFT policies, procedures and internal controls to ensure ongoing compliance with applicable AML/CFT and economic sanctions laws and regulations _____(***insert relevant law/regulation here)***;

ii. our AML/CFT policies, procedures and internal controls incorporate systems and controls to identify and verify our customers and beneficial owners[7], to identify source of funds, and performs (i) appropriate risk-grading procedures to differentiate between customer due diligence for high and low risk relationships (ii) ongoing customer due diligence, (iii) regular AML/CFT monitoring and sanction screening, (iv) staff AML/CFT training and (v) detect, investigate and, as required, report any suspicious activities to the relevant authorities;

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

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

iv. the accounts will only be operated by the Nominee and / or the Parent Company whom maintain ultimate, effective control over the account:

v. we have performed customer due diligence and identified and verified the beneficial owner(s) (to the extent warranted by risk of money laundering and the financing of terrorism), and have obtained the information on the purpose and the intended nature of the business relationship;

vi. to the best of our knowledge, we are unaware of any activities on the part of the customer(s), their beneficial owners which could lead us to suspect an involvement in criminal conduct, money laundering or terrorist activities;

vii. we will retain documents and information on the customer(s), including any beneficial owner, obtained as part of customer identification and verification process for at least 5 years after the termination of their relationship with us;

viii. we will provide the Fund and/or Northern Trust with related customer due diligence documents and information, which we may have on our files relating to the identity of the customer(s) and beneficial owner(s) upon request;

ix. none of the customer(s) including any beneficial owner are subject to sanctions lists administered by the European Union, the United States (including OFAC) and the United Nations, and we undertake to notify you immediately upon our identification of same should we become aware of such circumstances;

x. we will notify the Fund and/or Northern Trust, on request, of its identification of PEPs.

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

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

Yours faithfully,

[Capacity of signatory – Money Laundering Reporting Officer / Head of Compliance / Head of Risk / Director / Other]

[7] Beneficial owner includes the natural person(s) who ultimately owns or controls a customer and/or the natural person(s) on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement.

For and on behalf of
[Regulated Entity]

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

[On Letterhead of the Regulated Financial Intermediary]

[Date]

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

Re: ***[Insert Name of Regulated Financial Intermediary Company]-*** Verification of Identity in accordance with applicable Anti Money Laundering and Counter Terrorist Financing ("AML/CFT") Laws and Regulations[8]

Dear Sir/ Madam,

We confirm that, ***[insert name of Regulated Financial Intermediary]*** with a registered office located at ***[insert address]*** is licensed as _____ ***(insert description)*** by the _____***[insert regulatory body]*** and that we are supervised and monitored for compliance with AML/CFT regulatory requirements in _____***[insert country]***. Our registration or licence number is _____***[insert registration or licence number]***.

We are satisfied for Northern Trust International Fund Administration Services (Ireland) Limited (as administrator to funds) to rely on this confirmation for all designations.

We hereby confirm the following in connection with all investors ("Investors") and their beneficial owners in all designations:

i. we have established AML/CFT policies, procedures and internal controls to ensure ongoing compliance with applicable AML/CFT and economic sanctions laws and regulations _____(***insert relevant law/regulation here***);
ii. our AML/CFT policies, procedures and internal controls incorporate systems and controls to identify and verify our customers and beneficial owners[9], to identify source of funds, and performs (i)

[8] Please complete the Declaration of Beneficial Ownership below.

[9] Beneficial owner includes the natural person(s) who ultimately owns or controls a customer and/or the natural person(s) on whose behalf a transaction is being conducted. It also includes those persons who exercise ultimate effective control over a legal person or arrangement.

appropriate risk-grading procedures to differentiate between customer due diligence for high and low risk relationships (ii) ongoing customer due diligence, (iii) regular AML/CFT monitoring and sanction screening, (iv) staff AML/CFT training and (v) detect, investigate and, as required, report any suspicious activities to the relevant authorities;

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

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

iv. the accounts will only be operated by the financial intermediary whom maintain ultimate, effective control over the account;

v. we have performed customer due diligence and identified and verified the beneficial owner(s) (to the extent warranted by risk of money laundering and the financing of terrorism), and have obtained the information on the purpose and the intended nature of the business relationship;

vi. to the best of our knowledge, we are unaware of any activities on the part of the customer(s), their beneficial owners which could lead us to suspect an involvement in criminal conduct, money laundering or terrorist activities;

vii. we will retain documents and information on the customer(s), including any beneficial owner, obtained as part of customer identification and verification process for at least 5 years after the termination of their relationship with us;

viii. we will provide the Fund and/or Northern Trust with related customer due diligence documents and information, which we may have on our files relating to the identity of the customer(s) and beneficial owner(s) upon request;

ix. none of the customer(s) including any beneficial owner are subject to sanctions lists administered by the European Union, the United States (including OFAC) and the United Nations, and we undertake to notify you immediately upon our identification of same should we become aware of such circumstances;

x. we will notify the Fund and/or Northern Trust, on request, of its identification of PEPs.

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

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

Yours faithfully,

[Capacity of signatory – Money Laundering Reporting Officer / Head of Compliance / Head of Risk / Director / Other]

For and on behalf of

[Regulated Entity]

_____

Beneficial Owner(s) Declaration

Please tick one of the below boxes and complete the relevant section:

☐ We confirm there is a natural person(s) who is a beneficial owner of the investor (Please complete

section 1 below of this declaration).

☐ We confirm there is no natural person(s) who is a beneficial owner of the investor (Please complete section 2 of this declaration).

Section 1: Natural person(s) who is a beneficial owner of the investor

Beneficial Owner 1 (please complete in block capitals):

Full Name: Identification Number: Occupation:
Date of Birth (DD-MM-YYYY) : Place of Birth: Nationality:
Shareholding %:
Registered Address (PO Box or Care of will not be accepted):
City, Town, State, Province or County Postal/ZIP Code: Country:

Beneficial Owner 2 (please complete in block capitals):

Full Name: Identification Number: Occupation:
Date of Birth (DD-MM-YYYY) : Place of Birth: Nationality:
Shareholding %:
Registered Address (PO Box or Care of will not be accepted):
City, Town, State, Province or County Postal/ZIP Code: Country:

Beneficial Owner 3 (please complete in block capitals):

Full Name: Identification Number: Occupation:
Date of Birth (DD-MM-YYYY) : Place of Birth: Nationality:
Shareholding %:
Registered Address (PO Box or Care of will not be accepted):
City, Town, State, Province or County Postal/ZIP Code: Country:

Beneficial Owner 4 (please complete in block capitals):

Full Name: Identification Number: Occupation:
Date of Birth (DD-MM-YYYY) : Place of Birth: Nationality:
Shareholding %:
Registered Address (PO Box or Care of will not be accepted):
City, Town, State, Province or County Postal/ZIP Code: Country:

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

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

In completing the below, we confirm we have read and understood the above definition and we have provided below details of a senior manager(s) who should be recorded as the Beneficial Owner(s).

Senior managing official details (please complete in block capitals):

Full Name		
Date of Birth (DD-MM-YYYY) :	Place of Birth:	Nationality:
Registered Address (PO Box or Care of will not be accepted):		Title:
City, Town, State, Province or County:	Postal/ZIP Code:	Country:

Yours faithfully,

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

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

A. Beneficial Owner, in relation to a body corporate which is not a company whose securities are listed on a Regulated Market s any individual who ultimately owns or controls, whether through direct or indirect ownership or control (including through Bearer Shareholdings), 25% or more of the shares or voting rights of the body corporate or through control via other means.

Beneficial owner, in relation to a body corporate::

(i) A shareholding of 25% or more or an ownership interest of 25% or more in the customer held by a natural person shall be an indication of direct ownership. (ii) A shareholding of 25% or more or an ownership interest of 25% or more in the customer held by a corporate entity, which is under the control of a natural person(s), or by multiple corporate entities, which are under the

control of the same natural person(s), shall be an indication of indirect ownership. Beneficial Owner, in relation to a partnership (other than a limited liability partnership), means any individual who:
(i) ultimately is entitled to or controls, whether the entitlement or control is direct or indirect, 25% or more of the share of the capital or profits of the partnership or 25% or more of the voting rights in the partnership; or (ii) controls the partnership.

B. Beneficial Owner, in relation to a trust, means all of the following:
(i) the settlor; (ii) the trustees; (iii) any individual who is determined as being entitled to a vested interest in possession, remainder or reversion, whether or not the interest is defeasible, in the capital of the trust property (a beneficiary); (iv) in the case of a trust other than one that is set up or operates entirely for the benefit of individuals referred to in the paragraph relating to body corporates above, (v) the class of individuals in whose main interest the trust is set up or operates; or any individual (including the settlor, protector or trustees) who has control over the trust. In addition to the measures required in relation to a customer and a beneficial owner, in the case of beneficiaries of trusts or of similar legal arrangements that are designated by particular characteristics or class, a designated person shall obtain sufficient information concerning the beneficiary to satisfy the designated person that it will be able to establish the identity of the beneficiary at the time of the pay out or at the time of the exercise by the beneficiary of its vested rights."

C. Beneficial Owner, in relation to a foundation or other legal arrangement similar to a trust, means those individuals who hold equivalent or similar positions to those set out above.

D. Beneficial Owner, in relation to the estate of a deceased person where the estate is in the course of administration, means the executor or administrator of the estate concerned

Beneficial Owner in relation to a legal entity or legal arrangement, that does not fall within the above definitions, means:
i. If the individuals who benefit from the entity or arrangement have been determined, any individual who benefits from the property of the entity or arrangement;
ii. If the individuals who benefit from the entity or arrangement have yet to be determined, the class of such individuals in whose main interest the entity or arrangement is set up or operates;
iii. Any individual who exercises control over the property of the entity or arrangement; and
iv. Any individual holding a position, in relation to the legal entity or legal arrangement that is similar or equivalent to the position specified in relation to a trust.

Beneficial Owner, in any other case, means the individual who ultimately owns or controls the entity or arrangement or on whose behalf a transaction is being conducted.

NTIFASIL will consider persons who may exercise 'control through other means' (where identified) as per EBA Guidelines;
i. control without direct ownership, for example through close family relationships, or historical or contractual associations;
ii. using, enjoying or benefiting from the assets owned by the customer;
iii. responsibility for strategic decisions that fundamentally affect the business practices or general direction of a legal person.

Identification of beneficial owners means the individual name. Verification (as warranted by the degree of risk) may for a beneficial owner include date of birth, nationality and residential address.

APPENDIX IV – DATA PROTECTION DISCLOSURE STATEMENT

Introduction

This document outlines our data protection obligations and your data protection rights as they relate to your investment in the Fund under the EU data protection regime introduced by the General Data Protection Regulation (Regulation 2016/679, the "**Data Protection Legislation**").

The Fund will be characterised as a "data controller" under the Data Protection Legislation. The Management Company, the Investment Manager and the Investment Advisor and its affiliates and delegates may act as "data processors" under the Data Protection Legislation.

In this document, "we", "us" and "our" refers to the Fund, the Management Company, the Investment Manager and the Investment Advisor and its affiliates and delegates.

Your personal data

You understand that by virtue of making an investment in the Fund and your associated interactions with us (including this application, and including the recording of electronic communications or phone calls where applicable) or by virtue of you otherwise providing us with personal information on individuals connected with you as an investor (for example directors, trustees, employees, representatives, shareholders, investors, clients, beneficial owners or agents), you will provide us with certain personal information which constitutes personal data within the meaning of the Data Protection Legislation. This includes, but is not restricted to, data such as your name, residential address, email address, place of birth, date of birth, bank account details and details relating to your investment activity.

Why we may use your personal data

You understand that we may collect, store and use this data for lawful purposes including, in particular: (i) where this is necessary for the performance of the contract to purchase shares in the Fund; (ii) where this is necessary for compliance with a legal obligation to which we are subject (such as the anti-money laundering obligation to verify the identity of our customers (and, if applicable their beneficial owners) and retain copies of materials in respect thereof for five years after the relationship terminates); and/or (iii) where this is necessary for the purposes of the legitimate interests of us or a third party and such legitimate interests are not overridden by your interests, fundamental rights or freedoms.

It is noted that the Data Protection Legislation states that the use of personal data for direct marketing purposes (that is, providing you with information on products and services that may be of interest) may be regarded as being for the purposes of a legitimate interest. Analysing personal data for quality control, business and statistical analysis, tracking fees and costs, training and related purposes are also legitimate interests for using your personal data.

Accordingly, you understand that we may use your personal data for such purposes as described above, provided that we are acting in a fair, transparent and accountable manner and have taken appropriate steps to prevent such activity having any unwarranted impact on you and also noting your right to object to such use, as discussed below.

Given the specific purposes for which we envisage using your personal data, under the provisions of the Data Protection Legislation, we do not anticipate being required to obtain your consent to do so. Should we wish to use your personal data for other specific purposes that require your consent, we will contact you to request this.

Why we may transmit your personal data

You understand that in certain circumstances we and/or our authorised delegates may be legally obliged to share your data and other financial information with respect to your interest in the Fund with the Irish Revenue Commissioners and they, in turn, may exchange this information with foreign tax authorities including tax authorities located outside the EEA.

We anticipate disclosing your personal data to the Administrator, the Management Company, the Investment Manager and the Investment Advisor and their respective affiliates and this may include certain entities located outside the EEA.

The data protection measures we take

Any transmission of personal data by us or our duly authorised delegates outside the EEA shall be in accordance with the conditions in the Data Protection Legislation.

We and our duly authorised delegates shall apply appropriate information security measures designed to protect data in our/our delegates' possession from unauthorised access by third parties or any form of computer corruption.

We shall notify you of any personal data breach affecting you that is likely to result in a high risk to your rights and freedoms.

Your data protection rights

You understand that you have certain rights regarding our use of this data such as:

- the right to access your data (in an easily readable form);
- the right to examine and correct your data;

- the right to restrict the use of your data;
- the right to withdraw any consent given to the processing of your data (where applicable);
- the right to receive information regarding any entities we disclose your data to;
- the right to lodge a complaint with the Office of the Data Protection Commissioner (our lead supervisory authority).

You also have the right to object to the processing of your data where we have considered this to be necessary for the purposes of our legitimate interests.

Please note that the right for your data to be erased (the "right to be forgotten") that applies in some contexts under the Data Protection Legislation is not likely to be applicable to most, if not all, of the personal data you provide to us, given the specific nature of the purposes for which we use the data, as described above.

Our retention of your personal data

We or our duly authorised delegates may retain your personal data for a period of up to seven years following your disinvestment from the Fund.

Getting in touch

As we do not process personal data on a large scale, we are not required to designate a data protection officer. However, should you have any queries or wish to discuss your data protection rights with us, please contact Manco@iqeq.com