

GQG GLOBAL UCITS ICAV

Application Form

IMPORTANT

- To process an initial application, the Application Form, together with full anti-money laundering documentation and a valid signed FATCA/CRS Form, must be submitted to the Administrator.
- The Administrator will not process any subscriptions for shares until the relevant application process has been completed.
- Investors should ensure that the original application form is returned by post to the Administrator at the address below. Failure to return the original application form and supporting documentation will delay the payment of redemption proceeds (and dividends/distributions if applicable).
- Subscription monies received prior to the Administrator sending the investor an account number confirmation, subject to any applicable laws, will be returned to the investor without interest, expenses, or compensation, by electronic transfer to the account from which it was paid.
- No redemption payment will be made until the original application form has been received and the Administrator is satisfied that all necessary anti-money laundering checks have been completed in full.
- Investors should ensure the section headed "SIGNATURE" on page 33 has been signed before returning this application form to the Administrator.
- Investors should ensure all other relevant signature pages have been reviewed, completed and signed as appropriate; please see pages 9, 30, 31, 32, 33, 40 and 44 for reference.
- Should you have any queries in relation to your account setup, or wish to obtain your account name and number for the purposes of submitting a Subscription, please contact the Fund Administrator, Northern Trust, using the details provided below.
- If you are an existing client of NTIFASIL (the Administrator) please check the box on page 9 authorising them to leverage the due diligence documentation you may have previously provided them.

PLEASE FAX COMPLETED APPLICATION FORM TO THE FUND ADMINISTRATOR

BY FACSIMILE +353 1 542 2133

OR EMAIL TO GQGTInstructions@ntrs.com

(Please refer to APPENDIX II for "Terms and Conditions of Service for instructions issued to the Administrator via email")

Or POST MAIL HARD COPY TO (in any case post mail hard copy to):

Northern Trust International Fund Administration Services (Ireland) Limited
Investor Services Department
2nd Floor, Block A, City East Plaza, Towlerton, Ballysimon
Limerick, V94 X2N9, Ireland

For General Queries:

EMAIL GQGPartners_TA_Queries@ntrs.com, or

TELEPHONE +353 1 434 5024

For any general questions or KIID-related requests,
you may also contact the GQG Partners Client Services team at the following:

EMAIL ClientServices@GQGPartners.com, or

TELEPHONE +1 754 218 5500 (USA)

Please ensure that you have read the Prospectus and the Key Investor Information Documents (the "KIIDs") before completing this Application Form. The KIIDs are available at the Investment Manager's website at gqgpartners.com.

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

Your personal information will be handled by the Administrator or its duly appointed delegates as Data Processor for the GQG Global UCITS ICAV (the "ICAV") in accordance with the General Data Privacy Regulation (Regulation (EU) 2016/679) ("Data Protection Legislation"). Your information provided herein will be processed for the purposes of complying with Data Protection Legislation and this may include disclosure to the Irish Revenue Commissioners.

Please complete this Application Form in blue or black ink using **BLOCK CAPITAL LETTERS**.

This Application Form, together with the Money Laundering Verification Requirements and the Declaration of Irish Residence outside Ireland, constitutes your agreement to subscribe for Shares in the Fund. Please post, fax or email this Application Form to the contact details on the cover page. Investors should ensure that the original application form is returned by post to the Administrator. Failure to return the original application form and supporting documentation will delay the payment of redemption proceeds (and dividends/distributions if applicable).

Incomplete Application Forms (where **compulsory information*** has not been provided) may be rejected.

Once a signed Application Form and full AML Due Diligence Documentation are received in good order, the Administrator will send the account number confirmation to the authorised contact(s) upon which you can then place dealing instructions. (The account number must be specified on all forms to place transactions.)

Subscription instructions and proceeds must not be forwarded until the account number confirmation is issued to you by the Administrator. Any subscription deal received as part of the application form will be rejected. Subscription monies received prior to the Administrator sending the investor an account number confirmation, subject to any applicable laws, will be returned to the investor without interest, expenses, or compensation, by electronic transfer to the account from which it was paid.

NAME(S) FOR REGISTRATION (BLOCK CAPITALS)*

SHAREHOLDER 1

First Name & Family Name/Company Name*

Street 1*

Street 2*

Town/Country/Postcode*

Contact Telephone Number*

Contact Email Address*

SHAREHOLDER 2

First Name & Family Name/Company Name

Street 1

Street 2

Town/Country/Postcode

Contact Telephone Number

Contact Email Address

SHAREHOLDER 3

First Name & Family Name/Company Name

Street 1

Street 2

Town/Country/Postcode

Contact Telephone Number

Contact Email Address

SHAREHOLDER 4

First Name & Family Name/Company Name

Street 1

Street 2

Town/Country/Postcode

Contact Telephone Number

Contact Email Address

Mailing Address (if different from the address of the first name's holder)

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 Fund.

NT requires a standard two days turnaround for application completion, once the signed Application Form and full AML Due Diligence Documentation are received in good order. Please reach out to NT if you require assistance with placing trades sooner.

BANKING DETAILS

THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS*

Important information regarding bank accounts for subscriptions and redemptions

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

A copy of a recent bank statement (no more than 6 months old) or a banker’s reference must accompany the application to evidence 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 Credit or Financial Institutions are exempt from this requirement. (Refer to page #11 for current list of Equivalent Jurisdictions where Regulated Credit or Financial Institutions are exempt.)

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 CREDIT OR FINANCIAL INSTITUTIONS 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)

Name of Bank:	
Account Name:	
Address of Bank:	
Account Number:	
Sort Code:	
IBAN:	
Swift Code:	Reference Code:

A request to change bank account details MUST BE MADE IN WRITING TO THE ADMINISTRATOR 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.

CORRESPONDENT BANK INFORMATION

Note: Required if Payment Currency 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 Account Name:

Correspondent Account Number/IBAN:

Correspondent Bank Address:

NOTES

- a. Requests for redemption or distribution payments (see Dividend/Distribution Requirements) to be made by telegraphic transfer will be subject to bank charges. Such charges will normally be payable by the Shareholder although the ICAV has the discretion to determine that these charges should be borne by the ICAV or the relevant Sub-Fund.
- b. The Base Currency of the Sub-Fund and the designated currency of any Shares will be set out in the Prospectus. 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, subscriptions may be accepted in currencies other than the Base Currency.
- c. 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.

DISTRIBUTION/DIVIDEND REQUIREMENTS

I/We would like our distribution: Re-invested Paid by telegraphic transfer

Distributions paid by telegraphic transfer will be paid to the account specified above. Should you require your distribution to be paid to another account, please enter the banking details below. Please note if no option is indicated, such dividend payments will be reinvested. Distributions due will automatically be re-invested if you have failed to provide satisfactory evidence of your identity in accordance with the Administrator's anti-money laundering procedures notwithstanding any election to the contrary by you.

Name of Bank:	
Account Name:	
Address of Bank:	
Account Number:	
Sort Code:	
IBAN:	
Swift Code:	Reference Code:

NOTE *No third party payments will be undertaken.*

AGENT DETAILS

Contact Name:	
Agent Name:	
Address:	
Contact Email Address:	Contact Phone Number:
VAT Registration Number:	
Regulator:	Regulator Approval Number:

Agent's Stamp:

Agency Number:

Commission Terms Agreed with the ICAV Promoter:

RETURN OF VALUES (INVESTMENT UNDERTAKINGS) REGULATIONS 2013

The ICAV must collect additional information in order to satisfy Return of Values (Investment Undertakings) Regulations 2013 (S.I. 245 of 2013). Therefore any individual, company or any unincorporated body of persons which are an Irish resident or ordinarily Irish resident must provide the following additional information:

Tax Identification Number (TIN)/PPS Number: _____

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

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

In addition, any printed documentation issued by the Revenue Commissioners or by the Department of Social Protection which contain your name, address and tax reference number will also be acceptable. In the case of joint account holders, the additional documentation is required for each applicant.

Your personal information will be handled by the Administrator or its duly appointed delegates as Data Processor for the ICAV in accordance with the Data Protection Legislation. Your information provided herein will be processed for the purposes of complying with the Return of Values (Investment Undertakings) Regulations 2013 and this may include disclosure to the Irish Revenue Commissioners.

AML DUE DILIGENCE INFORMATION

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

1. Guide to Completing This Form

Part I – To be completed by all applicants.

Part II – To be completed by all applicants.

Part III – Please provide the due diligence documentation outlined in this section.

2. Certification of Documents – Required for High Risk Jurisdictions (please refer to page #11 for current list)

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 Practising Solicitor.
- A Practising 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.

3. English Translations

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

DUE DILIGENCE 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 required to open account):

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) including a beneficial owner of an investment account, 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 authorise 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. 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.

*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	% OWNERSHIP OR CONTROL	NATIONALITY	DATE OF BIRTH

For Trusts or similar arrangements, where the beneficiaries have not yet been determined, the class of persons in whose main interest the trust or similar legal arrangement has been set up should be stated (please provide an additional document/information as required):

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 deemed the UBO:

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.

Name	Address	NATIONALITY	Date of Birth

Signature 1 _____ Print Name _____ Date _____
Signature 2 _____ Print Name _____ Date _____

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

DUE DILIGENCE DOCUMENTATION – REQUIREMENTS

Part III

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.

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 (for verification purposes):

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

Examples of Proof of Address (for verification purposes):

- Bank statements/credit card statements.
- Utility bill.
- Household/motor insurance certificate and renewal notices.
- Correspondence from local authorities.
- Correspondence from the revenue commissioners or equivalent.
- Correspondence from any government body.
- Driving licence which confirms the address provided it has not also been used to satisfy the photographic identity requirement above.
- Payslip or salary advice dated within the previous 3 months.
- Confirmation of address from a lawyer or financial institution.

NOTE All documentation must reflect the current residential address and must be dated within the previous 3 months other than in the case of an official document known to be issued only or typically at fixed intervals of more than 3 months, in which case such document may be accepted during that period, to a maximum of 12 months (e.g. correspondence from local authorities).

LETTER OF ASSURANCE

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

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

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

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

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

DEEMED HIGH RISK JURISDICTIONS

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

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

REGULATED CREDIT OR FINANCIAL INSTITUTION

Where the applicant is a Regulated Credit or Financial Institution in one of the above referenced Equivalent Jurisdictions, 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 (Irish 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. Evidence of UBO registration on the Beneficial Ownership Register (Irish 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).

7. 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.

8. Verification of identity of the company from:
 - Extract from the relevant company registry providing details of the company; and/or
 - Copy of the Certificate of Incorporation or equivalent of the company; and/or
 - Copy of the Memorandum and Articles of Association or equivalent of the company; and/or
 - Copy of the latest audited financial statements of the company.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

NOMINEE COMPANY

Where the applicant is a Regulated Nominee Company from one of the above referenced Equivalent Jurisdictions, please provide the following:

1. Proof of regulation.
2. A letter of assurance from the regulated nominee company.
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 parent entity. Where there is no beneficial owner entitled to 25% or more, then the natural person(s) who hold the position of director(s) of the entity (investor) must be identified (along with address, date of birth and nationality).
4. Evidence of UBO Registration on the Beneficial Ownership Register (Irish 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. Letter of Assurance from the Regulated Credit or Financial Institution (Parent Company).
2. 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 (investor) must be identified (along with address, date of birth and nationality).
3. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

Alternatively, where an acceptable AML letter of assurance can't be provided by the regulated parent company with respect to the nominee company, please provide the following:

1. Full name of the nominee company.
2. Registered number of the nominee company.
3. Registered office address & principal business address of the nominee 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. Proof of regulation for the Regulated Parent Company.
6. 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 (investor) must be identified.
7. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

NOTE Where the nominee company is not a subsidiary of a regulated parent company, verify 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.

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 through the nominee company.

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 providing details of the nominee company; and/or
- Copy of the Certificate of Incorporation or equivalent of the nominee company; and/or
- Copy of the Memorandum and Articles of Association or equivalent of the nominee company; and/or
- Copy of the latest audited financial statements of the nominee company.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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 — see above Equivalent Jurisdictions), please provide the following:

1. Please provide proof of listing on a Regulated Market.

Where the applicant is not a Listed Company on an above referenced 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 of the company and verify the identity of two directors, or where applicable, one director 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 (Irish 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).

8. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify 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 providing details of the company; and/or
 - Copy of the Certificate of Incorporation or equivalent of the company; and/or
 - Copy of the Memorandum and Articles of Association or equivalent of the company; and/or
 - Copy of the latest audited financial statements of the company.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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 — see above Equivalent Jurisdictions), please provide the following:

1. Proof of listing for the listed parent company on a Regulated Market (e.g. a regulated market that subjects companies, whose securities are admitted to trading, to disclosure obligations which are consistent with the Legislation of the European Communities — see above Equivalent Jurisdictions).
2. Evidence of ownership by the listed company.
3. 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 (Irish investors only).

Where the parent company is not a Listed Company on an above referenced Regulated Market, please provide the following:

1. Full name of the subsidiary company.
2. Registered number of the subsidiary company.
3. Registered office address & principal business address of the subsidiary 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. Evidence of UBO Registration on the Beneficial Ownership Register (Irish 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).

7. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify 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 per NT risk rating requirements, the identity should be verified in line with its legal form.

8. Verification of identity of the company from:
- Extract from the relevant company registry providing details of the company; and/or
 - Copy of the Certificate of Incorporation or equivalent of the company; and/or
 - Copy of the Memorandum and Articles of Association or equivalent of the company; and/or
 - Copy of the latest audited financial statements of the company.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

GOVERNMENT/PUBLIC BODY

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

1. Please provide 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).

Where the applicant is not 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 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.

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

8. Identify and verify the identity of at least two directors or, where applicable, one director and one authorised signatory and evidence of authorisation to act on the customer's behalf.

9. Certified copy of the audited financial statements of the government body or public authority.
10. Due Diligence Questionnaire (incl. SOW/SOF for investor).

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

PENSION SCHEME

Where the applicant is an Employee/Superannuation or similar scheme in one of the above referenced Equivalent Jurisdictions, please provide the following confirmations from the trustees of the scheme:

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.

Where the applicant is not an Employee/Superannuation or similar scheme in one of the above referenced Equivalent Jurisdictions, please provide the following:

1. Full name of the pension scheme.
 2. Registered office address of the pension scheme.
 3. One of the following:
 - Confirmation of registration of the pension scheme (as appropriate) from the relevant tax authorities or pensions board.
- Or
- Identity of the controllers (trustees/directors/governors/board members or equivalent) of the scheme; and
 - Constitutional/Formation Document (e.g. Trust Deed); and
 - Appropriate background information.
 - Identify any beneficial owner beneficially entitled to 25% or more (directly or indirectly) of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity must be identified.
 - Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

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

4. Identify and verify the identity of the scheme administrator and entity carrying out AML/CTF controls on scheme investors (per legal form); or
5. Written confirmation from the entity carrying out AML/CTF controls similar to that requested from a regulated third party undertaking due diligence.
6. 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.
7. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO)

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

COLLECTIVE INVESTMENT SCHEMES

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

1. Please provide proof of regulation/listing.
2. Names of any investors (beneficial owners) in the CIS who own 25% or more (directly or indirectly) of the share capital. 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.
3. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

Where the CIS is not either listed on a regulated financial market (as above) or regulated as a designated person in one of the above referenced Equivalent Jurisdictions, 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 due diligence on the investors in the CIS and evidence that this entity is regulated for AML purposes.
7. Names of any investors (beneficial owners) in the CIS who own 25% or more (directly or indirectly) of the share capital. Where the CIS is a corporate body and there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/director(s) of the entity (investor) must be identified.
8. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

INDIVIDUALS (INCLUDING JOINT ACCOUNT HOLDERS)

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

1. Photographic identity document.
2. Proof of address.

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

3. Due Diligence Questionnaire (incl. Source Wealth and Source of Funds).

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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. Details of the directors of the company and verify the identity of at least 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 (investor) must be identified.
6. Evidence of UBO Registration on the Beneficial Ownership Register (Irish 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).

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.

7. Verification of identity of the company from:
 - Extract from the relevant company registry providing details of the Company; and/or
 - Copy of the certificate of incorporation or equivalent of the Company; and/or
 - Copy of the Memorandum and Articles of Association or equivalent of the Company; and/or
 - Copy of the latest audited financial statements of the Company.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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. Identify all managing members.
4. Verify the identity of at least two managing members or, where applicable, one managing member 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. Evidence of UBO Registration on the Beneficial Ownership Register (Irish 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.).

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.

7. Constitutional document for the LLC (e.g. Certificate of Formation).
8. Operating agreement for the LLC.

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

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

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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.
4. 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.
5. Verify the identity of the general partner and a second partner (or in the absence of same an authorised signatory).
6. Evidence of UBO Registration on the Beneficial ownership Register (Irish 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).

7. Constitutional document for the Partnership (e.g. Partnership Agreement).

Where the applicant is not a Partnership Fund or located in one of the aforementioned deemed high risk jurisdictions, the following is also required:

8. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO).
9. Identify and verify the identity of any partner who own more than 10% (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.

Where the applicant not a Partnership Fund or is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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 the settlor 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 may be required by the administrator to the extent warranted by the 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.
10. Evidence of UBO Registration on the Beneficial Ownership Register (Irish 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 not Regulated Trustees investing on behalf of a Trust, or where the applicant is domiciled in an aforementioned high risk jurisdiction, the following is also required:

11. Verify the identity of the beneficiaries beneficially entitled to trust's assets or 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 must be identified and verified.
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 or for each individual).

Where the applicants are not Regulated Trustees investing on behalf of a Trust or where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

FOUNDATION

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

1. Full name of the foundation.
2. Registered address of the foundation.
3. Confirmation of 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, and the nature/purpose of the foundation.
6. Identify all trustees, and verify the identity of two trustees, where applicable.
7. 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.
8. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

NOTE Where there is a named individual beneficiary with a 25% interest or more, the beneficiary will need to be verified.

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 not Regulated Trustees investing on behalf of a Foundation or similar entity, or where the applicant is domiciled in an aforementioned high risk jurisdiction, the following is also required:

9. Confirmation of the funding of the foundation.
10. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO).
11. Identify and verify the identity of the beneficiaries who hold more than 10% 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.

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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. Names of all trustees/directors (or equivalent) of the charity.
6. Identify and verify the identity of the company secretary or equivalent or, where applicable, verify the identity of one of the trustees.
7. (If a charitable trust), details of the settlor of the charitable trust.
8. Names or classes of persons who stand to benefit from the objects of the charity, or identify and verify any beneficiary beneficially entitled to 25% or more of the assets. Where there is no beneficial owner entitled to 25% or more, the natural person(s) who hold the position of senior managing official(s)/trustee(s) of the entity must be identified.
9. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

10. Copy of relevant charities register or confirmation of the registration of the charity with the relevant tax authorities (e.g. UK Charities Commission/HMRC).

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

11. Certified copies of the audited financial statements.
12. Certified constitutional/formation document of the charity.
13. 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).
14. 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.
15. Identify and verify the settlor, where applicable.

NOTE Where the applicant is not a registered Charity, documentation provided should be certified as true copies of the original documentation.

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 & principal business 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 confirmation of a relevant club/society register.
6. List of officers of the club/society.
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. Names or classes of persons who stand to benefit from the Club or Society, 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.
9. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

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

10. Audited financial statements for the club/society.
11. Constitutional/Formation document of the club/society
12. Identify and verify the identity of all persons who own or control over 10% of the entity's share capital, profit or voting rights.
13. Confirmation of the funding of the club or society.

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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 office address & principal business address of the School, College or University.
3. Confirmation of a relevant School, College or University register or appropriate background information.
4. Names of main officials of the School.
5. Identify and verify the identity of at least two officials or, where applicable, one official and one authorised signatory.
6. Details of ownership of the entity. In particular, confirmation 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.
7. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).
8. Identify and verify the settlor, where applicable.

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

9. Identify and verify the identity of all persons who own or control over 10% 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.
10. Due Diligence Questionnaire (incl. SOW/SOF for investor and UBO/Settlor).

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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. Confirmation of the nature/purpose of the church with details of how the church is funded.
4. Confirmation of a relevant church register or a copy of the revenue approval for the church.
5. Names of all trustees/directors (or equivalent) 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. Names or classes of persons who stand to benefit from the objects of the church (where ascertainable); 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)/trustee(s) of the entity must be identified.
8. Identify and verify the settlor where applicable.
9. Evidence of UBO Registration on the Beneficial Ownership Register (Irish investors only).

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

10. Audited financial statements for the church.
11. Constitutional/Formation document of the church.

12. Due Diligence Questionnaire (incl. SOW/SOF for investor and settlor if applicable).
13. 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.

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

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 (Irish 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 all persons and their functions who are empowered to make the investment on behalf of the trade union (president, secretary, treasurer and other senior committee members).

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

9. Identify and verify the identity of at least two senior committee members of the trade union.
10. Due Diligence Questionnaire (incl. SOW/SOF for investor)
11. Identify and verify the identity of all persons who own or control over 10% 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.

Where the applicant is domiciled in an aforementioned high risk jurisdiction, documentation should be certified as true copies of the original.

LETTERS OF ASSURANCE REQUIREMENTS- UNREGULATED NOMINEES AND REGULATED CREDIT OR FINANCIAL INSTITUTION

UNREGULATED NOMINEE LETTER OF ASSURANCE

[On Letterhead of the Regulated Parent Company]

[Date]

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

Re: [Insert Name of Unregulated Nominee/ Intermediary Company] ('the Nominee Company') - Verification of Investor(s) Identity in accordance with applicable Anti Money Laundering and Counter Terrorist Financing ("AML/CFT") Laws and Regulations¹

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.

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 owners², to identify source of funds, and performs (i) appropriate risk-grading procedures to differentiate between customer due diligence for high and low risk relationships (ii) ongoing customer due diligence, (iii) regular AML/CFT monitoring and sanction screening, (iv) staff AML/CFT training and (v) detect, investigate and, as required, report any suspicious activities to the relevant authorities;
- (iii) we have systems and controls in place to identify Politically Exposed Persons, their relatives and close associates (collectively PEPs) and we conduct enhanced due diligence, including establishing the source of wealth and the source of funds, and enhanced ongoing monitoring on PEPs and other high risk customers.

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

- (iv) the accounts will only be operated by the Nominee and / or the Parent Company whom maintain ultimate, effective control over the account:
- (v) we have performed customer due diligence and identified and verified the beneficial owner(s) (to the extent warranted by risk of money laundering and the financing of terrorism), and have obtained the information on the purpose and the intended nature of the business relationship;

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

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

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

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

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

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

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

Yours faithfully,

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

For and on behalf of

[Regulated Entity]

¹Please complete the Declaration of Beneficial Ownership below.

²Beneficial 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.

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 Regulations¹

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 owners², 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 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]

¹Please complete the Declaration of Beneficial Ownership below.

²Beneficial 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.

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 owner¹ of the investor (Please complete section 1 below of this declaration); **or,**

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: _____ Title: _____
 Registered Address (PO Box or Care of will not be accepted): _____

City, Town, State, Province or County: _____
 Postal/Zip Code: _____ Country: _____

If needed, please add additional senior managing officials on a separate sheet.

Yours faithfully,

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

For and on behalf of

[Regulated Entity]

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

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

Beneficial owner, in relation to a body corporate::

(i) A shareholding of 25% or more or an ownership interest of 25% or more in the customer held by a natural person shall be an indication of direct ownership. (ii) A shareholding of 25% or more or an ownership interest of 25% or more in the customer held by a corporate entity, which is under the control of a natural person(s), or by multiple corporate entities, which are under the control of the same natural person(s), shall be an indication of indirect ownership. (iii) Where there is no person identified as beneficial owner, or if there is any doubt that the person(s) identified are the beneficial owner(s), the natural person(s) who hold the position of senior managing official(s)/ director(s) of the investor, will be deemed the beneficial owners.

B. Beneficial Owner, in relation to a partnership (other than a limited liability partnership), means any individual who:

(i) ultimately is entitled to or controls, whether the entitlement or control is direct or indirect, 25% or more of the share of the capital or profits of the partnership or 25% or more of the voting rights in the partnership; or (ii) controls the partnership.

C. Beneficial Owner, in relation to a trust, means all of the following:

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

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

REPRESENTATIONS AND WARRANTIES

- I/We confirm that I am/we are 18 years of age or over.
- I/We, having received and considered a copy of the current Prospectus, any relevant supplements thereto and the most recent annual and/or semi-annual report of the ICAV (if any), hereby confirm and declare that this application is based solely on the information contained in such documentation and is made pursuant to the terms of this Application Form, and acknowledge that it is subject to Irish law.
- In addition, I/we confirm that I/we have received and read the information contained in this form and confirm that a copy of the relevant KIID or KIIDs has/have been supplied to me/us. I/We confirm that I/We have read the relevant KIID or KIIDs and that any future investments to any other sub-fund or Share Class of the umbrella fund can also be transacted based on this confirmation. I/We hereby acknowledge and agree that the updated relevant KIID or KIIDs for each Share Class is/are available at the Investment Manager’s website at gqgpartners.com/products/ucits/ and that I/we will read and review the most up-to-date version of the relevant KIID or KIIDs prior to making any subsequent application for Shares in the ICAV. I/We request and authorise GQG Partners LLC (“GQG” or the “Investment Manager”) to act in accordance with my/our instructions.
- I/We certify that I am/we are eligible to invest in the ICAV, the relevant Fund or Share Class thereof, and I am/we are not acquiring Shares for or on behalf of, or for the benefit of, any person or entity who/which is not eligible to invest in the ICAV, the relevant Fund or Share Class thereof, nor do I/we intend transferring any Shares which I/we may purchase to any person or entity who/which is not eligible to invest in the ICAV, the relevant Fund or Share Class thereof. I/We confirm that I/we are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose the entire sum invested.
- I/We agree to notify the ICAV or the Administrator immediately if I/we become aware that any of the representations, declarations or warranties given by me/us in this Application Form is/are no longer accurate and complete in all respects and agree immediately to take such action as the ICAV may direct, including where appropriate, redemption of my/our entire holding.
- I/We agree to indemnify the Investment Manager and the Administrator, on its own behalf and as agent of the ICAV and the ICAV, and agree to keep the Investment Manager, Administrator and the ICAV indemnified against any loss of any nature whatsoever arising to any of them as a result of any breach of any of the representations, warranties or declarations given by me/us in this Application Form and any failure to timely deliver subscription monies or resulting from the failure of subscription moneys to arrive when reasonably expected.
- I/We have such knowledge and experience in business and financial matters or have obtained advice from a professional adviser such that I am/we are capable of evaluating the merits, and the risks, of an investment by me/us in the ICAV.
- I/We understand that the tax disclosure set forth in the Prospectus is of a general nature and may not cover the jurisdiction in which I am/we are subject to taxation and that the tax consequences of my/our purchase of Shares depend on my/our individual circumstances.
- I/We acknowledge the right of ICAV at any time to require the mandatory redemption of Shares in the circumstances provided for in the Prospectus.

– Please tick (✓) as appropriate:

- » I/We hereby certify that the Shares are not being acquired for the benefit of, directly or indirectly, any U.S. Person nor in violation of any applicable law, and that I/we will not, subject to the conditions set forth in the Prospectus, sell or offer to sell or transfer Shares in the United States or to or for the benefit of a U.S. Person.

In particular: (a) I/we understand that the ICAV has not been and will not be registered under the United States Investment Company Act of 1940, as amended, that the Shares have not been registered and will not be registered under the United States Securities Act of 1933, as amended, and that the Shares have not been qualified under the securities laws of any state of the United States and may not be offered, sold or transferred in the United States or to or for the benefit of, directly or indirectly, any U.S. Person; (b) I am not/none of us is a U.S. Person; and (c) I am not/none of us is acquiring the Shares for the account or benefit, directly or indirectly, of any U.S. Person or with a view to their offer, sale or transfer within the United States or to or for the account or benefit, directly or indirectly, of any U.S. Person.

Prospective investors who are unable to give this certification should contact their investment advisor or GQG Partners Client Services team for details on other GQG products they may be eligible to invest in.

- » I/We, if not a natural person, am/are duly organised, validly existing and in good standing under the laws of the jurisdiction in which I am/we are organised and I/we have the power and authority to enter into and perform my/our obligations under this Application Form.
- » I/We am/are able to bear the economic risk of an investment in the Shares, including, without limitation, the risk of loss of all or a part of my/our investment. I/We do not have an overall commitment to investments which are not readily marketable that is disproportionate to my/our net worth, and my/our investment in the Shares will not cause such overall commitment to be excessive.
- » The Administrator and the ICAV are each hereby authorised and instructed to accept and execute any instructions in respect of the Shares to which this application relates given by me/us in written form or by facsimile. I/We hereby agree to indemnify the Investment Manager and the Administrator, on its own behalf and as agent of the ICAV and agree to keep the Administrator indemnified against any loss of any nature whatsoever arising as a result of the Administrator acting upon facsimile instructions. The Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.
- » I/We acknowledge that due to anti-money laundering requirements operating within Ireland, the Administrator or the ICAV (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Investment Manager and the Administrator, on its own behalf and as agent of the ICAV and the ICAV shall be held harmless and indemnified against any loss arising as a result of a failure to process the application, or a delay in processing any redemption requests, if such information requested by the Administrator or the ICAV has not been provided by me/us or has been provided in incomplete form.
- » In respect of joint applicants only, we direct that on the death of one of us the Shares for which we hereby apply be held in the name of and to the order of the survivor or survivors of us or the executor or administrator of the last of such survivor or survivors.
- » I/We consent to personal information obtained in relation to me/us being processed by the Administrator, the ICAV, the Depositary, the Distributor or the Investment Manager and their agents, affiliates, delegates and group companies in accordance with the Data Protection Legislation. I/We acknowledge that information, including personal data, in relation to me/us will be held, used, disclosed and processed as set out in Appendix I for the purposes cited therein, including for the purposes of (a) managing and administering my/our holdings in the ICAV and any related account on an ongoing basis; (b) for any other

specific purposes where I/We 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; (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 ICAV 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) and for other legitimate business interests of the ICAV or its delegates.

- » I/We hereby acknowledge my/our right of access to and the right to amend, erase, transfer and rectify my/our personal data, as provided herein in accordance with the Data Protection Legislation.
- » I/We understand that the ICAV is a data controller, and certain of its service providers also are, and will hold any personal information provided by me/us in confidence and in accordance with the Data Protection Legislation.
- » I/We consent to the recording of telephone calls that I/we make to and receive from the Administrator, the ICAV, the Distributor 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 hereby authorise the ICAV and the Administrator to retain all documentation provided by me/us in relation to my/our investment in the ICAV for such period of time as may be required by Irish law, but for not less than five years after the period of investment has ended.
- » The Administrator or ICAV may disclose personal information to the Depositary 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 personal information in relation to your shareholding in accordance with legal and regulatory requirements even after you have fully redeemed from the Fund.
- » I/We consent to the processing of my/our information and the disclosure of my/our information as outlined above and to the Investment Manager and where necessary or in the Fund'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.
- » I/We consent to the ICAV, Distributor 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 not to receive such information. Please tick here to NOT receive such information and/or marketing material:
- » From time to time, the Investment Manager may send me/us information about other products or services which they offer. I/we have a right not to receive such information. Please tick here to NOT receive such information and/or marketing material:
- » By checking this box, I/we confirm that I/we have read, acknowledge and accept the Data Protection Notice set out in Appendix I to this form.

- I/We agree to provide to the Fund, the Manager and the Administrator at such times as each of them may request such declarations, certificates, self-certification forms, withholding statements or documents as each of them may reasonably require (the “Tax Information”) in connection with this investment (including for the purposes of tax, FATCA and/or CRS regulations and reporting requirements). Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Fund, the Manager 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 Fund.
- In addition to the Tax Information, I/we agree to promptly provide, and periodically update, at any times requested by the Manager or the Administrator with any information (or verification thereof) the Manager or the Administrator deems necessary for the ICAV to comply with tax reporting requirements, FATCA and/or CRS (including any imposed by any inter-governmental agreement (IGA) or any legislation, law, regulation or other official guidance in relation to any IGA on the implementation of FATCA or CRS). This may include such information as is required to evidence the Fund’s (or any account holder in the Fund’s) status for FATCA or CRS purposes, including (but not limited to) whether the ICAV is a financial institution, or whether its account holders are U.S. persons for purposes of FATCA, or what the account holder’s country of tax residence for purposes of CRS.
- I/We represent and warrant the completeness and accuracy of any information (as at the date of submission) and authorise the Fund, the Manager and the Administrator to act upon such information in good faith, including, but not limited to, disclosing or submitting such information to the Irish tax authorities. I/We agree to waive any provision of foreign law that would, absent such a waiver, prevent compliance with such requirements. The ICAV shall have no obligation to carry out any investigation with respect to the truth, accuracy or completeness of any information provided by us and I/we will, on demand, hold the ICAV harmless from any liability resulting from my/our failure to provide complete and accurate Information.
- I/We hereby acknowledge that if I/we fail to provide any 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 Fund.
- I/We hereby acknowledge that if I/we fail to provide any information and such failure results in the ICAV being unable to comply with FATCA, any IGA or CRS, the Manager 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 my/our failure to meet its obligations under this Section, including any U.S. withholding tax imposed on the Fund.
- 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/we have provided an e-mail address to the ICAV or its delegate, consent to any such notice or document being sent to me/us electronically to the 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 am/we are not obliged to accept electronic communication and may at any time choose to revoke my/our agreement to receive communications electronically by notifying the ICAV in writing at the above address, provided that my/our agreement to receive communications electronically shall remain in full force and effect pending receipt by the ICAV of written notice of such revocation.
- Where I am/we are investing as nominee, I/we shall provide my/our client(s) with the KIID issued in respect of the Sub-Fund and/or Share Class (as the case may be) and I/we shall ensure that we do so in compliance with Commission Regulation (EU) No. 583/2010, as amended from time to time or by any supplemental legislation and in compliance with the applicable legislation in any jurisdiction in carrying out this activity. I/We shall maintain records of my/our provision of the KIID to my/our clients and shall furnish such records to the Fund, or its delegates, upon request.

- I/We understand that the ICAV is susceptible to operational and information security risks through breaches in cyber security. Cyber security breaches include, without limitation, infection by computer viruses and gaining unauthorised access to the computer's systems through "hacking" or other means for the purpose of misappropriating assets or sensitive information, corrupting data, or causing operations to be disrupted. Cyber security breaches may also occur in a manner that does not require gaining unauthorised access, such as denial-of-service attacks or situations where authorised individuals intentionally or unintentionally release confidential information stored on the Company's systems. A cyber security breach may cause disruptions and impact the Company's business operations, which could potentially result in financial losses, inability to determine a fund's NAV, violation of applicable law, regulatory penalties and/or fines, compliance and other costs. I/We understand that indirect cyber security breaches at third party service providers may also generate the same risks associated with direct cyber security breaches for the investment. Further, indirect cyber security breaches at an issuer of securities in which the Company invests may similarly negatively impact it.
- I/We hereby confirm that this Application Form is/is not being made by a Politically Exposed Person ("PEP")/ immediate family member of a PEP/close associate of a PEP and that I/we do/do not have a beneficial owner who is a PEP/immediate family member of a PEP/close associate of a PEP and this Application Form is/is not being made for the benefit of a PEP/immediate family member of a PEP/close associate of a PEP and it is/is not intended to transfer the Shares to a PEP/immediate family member of a PEP/close associate of a PEP.
- I/We hereby authorise investigation of my/our identity, and agree to an enhanced ongoing monitoring should I/ we be deemed to be a Politically Exposed Person. Politically Exposed Persons are defined as "natural persons who are or have been entrusted with prominent public functions within the past year, as well as immediate family members, or persons known to be close associates, of such persons".

INVESTOR TAX RESIDENCY (THIS SECTION MUST BE COMPLETED)*

INVESTMENT UNDERTAKING TAX — DECLARATION OF RESIDENCE

DECLARATION OF RESIDENCE INSIDE OR OUTSIDE IRELAND (OWN BEHALF ONLY)

Please tick (i), (ii) or (iii) as appropriate.

(i) IRISH RESIDENTS

I am/we are an Irish resident who will cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *Irish resident companies entitled to the lower rate of Investment Undertaking Tax are required to provide a statement on its letterhead confirming that the company is within the charge of corporation tax.*

OR

(ii) EXEMPT IRISH RESIDENTS

I am/we are an Irish resident who will not cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *If this box is ticked, please also complete the declaration of exempt Irish residents below.*

OR

(iii) NON-IRISH RESIDENTS

I am/we are not currently resident or ordinarily resident who will not cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *If this box is ticked, please also complete the declaration of residence outside Ireland below.*

DECLARATION OF RESIDENCE FOR THE BENEFICIAL OWNER INSIDE OR OUTSIDE IRELAND (INTERMEDIARIES ONLY)

Please tick (i), (ii) or (iii) as appropriate.

(i) IRISH RESIDENTS

As an Intermediary, I/we declare that the person who will be beneficially entitled to the units is an Irish resident who will cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *Irish resident companies entitled to the lower rate of Investment Undertaking Tax are required to provide a statement on its letterhead confirming that the company is within the charge of corporation tax.*

OR

(ii) EXEMPT IRISH RESIDENTS

As an Intermediary, I/we declare that the person who will be beneficially entitled to the shares/units is an Irish resident who will not cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *If this box is ticked, please also complete the declaration of exempt Irish residents below.*

OR

(iii) NON-IRISH RESIDENTS

As an Intermediary, I/we declare that the person who will be beneficially entitled to the shares/units is not currently resident or ordinarily resident who will not cause the Fund to have an obligation to deduct and pay tax to the Irish Revenue Commissioners. *If this box is ticked, please also complete the declaration of residence outside Ireland below.*

Authorised signatory: _____

Authorised signatory: _____

Date: _____

DECLARATION OF EXEMPT IRISH RESIDENT ENTITIES

DECLARATION REFERRED TO IN SECTION 739D(6), TAXES CONSOLIDATION

It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of shares/units.

- I declare that the information contained in this declaration is true and correct.
- I also declare that I am applying for the shares/units on behalf of the applicant named below who is entitled to the units 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) TCA 1997;

a qualifying management company;

entitled to exemption from income tax and capital gains tax by virtue of sections 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 units 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 units 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 units.
- I/we* undertake that, if the units cease to be assets of the approved retirement fund/the approved minimum retirement fund* or the PRSA, including a case where the units 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/units on behalf of persons who
 - » to the best of my/our* knowledge and belief, have beneficial entitlement to each of the shares/units 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/units made by me/us* from the date of this application will be made on behalf of persons referred to in section 739D 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)

Capacity in which declaration is made: _____ Date: _____

Authorised signatory: _____ (declarant)

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/units.
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

It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of shares/units.

Declaration on Own Behalf

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

- I am/we are/the company is* not currently resident or ordinarily resident in Ireland, and
- should I/we/the company* become resident in Ireland I 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/units on behalf of persons:

- who will be beneficially entitled to the shares/units; and
- who, to the best of my/our* knowledge and belief, are neither resident nor ordinarily 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.

SIGNATURE (MUST BE COMPLETED BY ALL APPLICANTS)*

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

Date: _____	
Signed:	Signatory Capacity if applicable (i.e. Director/manager):
1. _____	_____
2. _____	_____
3. _____	_____
4. _____	_____
IN THE CASE OF ALL JOINT HOLDERS — ALL HOLDERS MUST COMPLETE THIS DECLARATION.	

ENTITY SELF-CERTIFICATION FOR FATCA AND CRS

Instructions for completion and Data Protection notice

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

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

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

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

<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.

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

(Mandatory fields are marked with an *)

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 (A), (B) or (C) below and complete as appropriate.

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

U.S. TIN: _____ OR

(B) The Entity is not a *Specified U.S. Person* (Please also complete Sections 3, 4 and 5) OR

(C) The Entity is a U.S. person but not a *Specified U.S. Person* (Please also complete Sections 4 and 5)

Indicate exemption: _____

SECTION 3: ENTITY'S FATCA CLASSIFICATION*

The information provided in this section is for FATCA, please note your FATCA classification may differ from your CRS classification in Section 5.

3.1 Financial Institutions under FATCA

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

- I. *Irish Financial Institution or a Partner Jurisdiction Financial Institution.*
- II. *Registered Deemed Compliant Foreign Financial Institution.*
- III. *Participating Foreign Financial Institution.*

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

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

- I. *The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN.*

Please provide the sponsor's name and sponsor's GIIN :

Sponsor's Name: _____

Sponsor's GIIN: _____

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 U.S. reportable accounts are identified.

- II. *The Entity is an Exempt Beneficial Owner.*

Please tick and confirm the category of Exempt Beneficial Owner:

- a. Government Entity
- b. International Organisation
- c. Foreign Central Bank
- d. Exempt Retirement Fund
- e. Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.

III. *The Entity is a Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the IGA Agreement).*

Indicate exemption: _____

IV. *The Entity is a Non-Participating Foreign Financial Institution.*

V. *The Entity is an Excepted Foreign Financial Institution.*

Indicate exemption: _____

VI. *The Entity is a Trustee Documented Trust.*

Please provide your Trustee's name and GIIN.

Trustee's Name: _____

Trustee's GIIN: _____

3.4 Non-Financial Institutions ("NFFE") under FATCA:

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

I. *Active (NFFE)*

II. *Passive (NFFE)*

Please tick the box that applies:

a. *Passive (NFFE) with no Controlling Persons that are specified U.S. Persons.*

b. *Passive (NFFE) with Controlling Persons that are specified U.S. Persons. (If this box is ticked, please also complete section 6.1 for each of the Controlling Person(s) of the Entity and complete an "Individual (Including Controlling Person(s) Self-certification for FATCA and CRS" form for each Controlling Person(s) as outlined in Section 6.2.)*

III. *Excepted (NFFE)*

VI. *Direct Reporting (NFFE)*

Please provide your GIIN.

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 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 (i.e. Ireland or the USA)

COUNTRY OF TAX RESIDENCY	TAX ID NUMBER	IF TIN UNAVAILABLE SELECT REASON A, B OR C AND CHECK BOX BELOW

If a TIN is unavailable, please tick the appropriate box as follows:

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 required the collection of the TIN issued by such country/jurisdiction.)

SECTION 5: ENTITY’S CRS CLASSIFICATION*

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

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

For more information please see the OECD CRS Standard and associated commentary: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard>.

5.1 Financial Institutions under CRS:

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

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

I. *A Reporting Financial Institution resident in a participating CRS jurisdiction.*

II. *A Financial Institution Resident in a Non-Participating Jurisdiction.*

Please tick the box that applies:

- a. *An Investment Entity resident in a Non-Participating Jurisdiction and managed by another Financial Institution. (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity in Section 6 below and complete a separate individual self-certification forms for each of your Controlling Persons.)*
- b. *An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution.*
- c. *Other Financial Institution, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company.*

III. *Non-Reporting Financial Institution under CRS.*

Specify the type of Non-Reporting Financial Institution below:

- a. Government Entity
- b. International Organisation
- c. Central Bank
- d. Broad Participation Retirement Fund
- e. Narrow Participation Retirement Fund
- f. Pension Fund of a Governmental Entity, International Organization, or Central Bank
- g. Exempt Collective Investment Vehicle
- h. Trust whose trustee reports all required information with respect to all CRS
- i. Reportable Accounts
- j. Qualified Credit Card Issuer
- k. Other Entity defined under the domestic law as low risk of being used to evade tax.

Specify the type provided in the 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.

I. *Active NFE* — a corporation the stock of which is regularly traded on an established securities market.

Please provide the name of the established securities market on which the corporation is regularly traded: _____

- II. *Active NFE* — if you are a Related Entity of a regularly traded corporation.
Please provide the name of the regularly traded corporation that the Entity is a Related Entity of: _____
Please provide details of the securities market on which the Entity is regularly traded: _____
- III. *Active NFE* — a Government Entity or Central Bank.
- IV. *Active NFE* — an Internal Organisation.
- V. *Active NFE* — *other* than those listed in I, II, III or IV above (for example, a start-up NFE or a non-profit NFE).
- VI. *Passive NFE* — If this box is ticked please also complete Section 6.1 for each of the Controlling Person(s) of the Entity and a separate “*Individual (including Controlling Person’s) Self-Certification for FATCA and CRS form*” as indicated in Section 6.2 for each Controlling Person(s).

SECTION 6: CONTROLLING PERSONS

NOTE Please note that each Controlling Person must complete a separate “*Individual (including Controlling Persons) FATCA and CRS Self-Certification*” form.

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

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

6.1 Controlling Person(s) of the Account Holder:

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

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

- I. _____
- II. _____
- III. _____

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

6.2 Complete a separate “*Individual (including Controlling Persons) Self-Certification for FATCA and CRS*” 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 acknowledge and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

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

Authorised Signature(s)*:

Print Name(s)*:

Capacity in which declaration is made*:

Date (dd/mm/yyyy)*: _____

INDIVIDUAL (INCLUDING CONTROLLING PERSONS) SELF-CERTIFICATION FOR FATCA AND CRS

Instructions for completion and Data Protection notice

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003. Please note that in 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 the OECD websites at:

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

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

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.

Sections 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 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 (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: _____

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:

U.S. TIN: _____ OR

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

SECTION 3: COMMON REPORTING STANDARD (CRS) DECLARATION OF TAX RESIDENCY/RESIDENCIES (PLEASE CONFIRM ALL TAX RESIDENCIES)*

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

For further guidance 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 (i.e. Ireland or the USA).

COUNTRY OF TAX RESIDENCY	TAX ID NUMBER	IF TIN UNAVAILABLE SELECT REASON A, B OR C AND CHECK BOX BELOW

If a TIN is unavailable, please tick the appropriate box as follows:

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 required the collection of the TIN issued by such country/jurisdiction.)

SECTION 4: TYPE OF CONTROLLING PERSON*

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

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

Please confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box:

	PLEASE TICK	ENTITY NAME
Controlling Person of a legal person — control by ownership		
Controlling Person of a legal person — control by other means		
Controlling Person of a legal person — senior managing official		
Controlling Person of a trust — settlor		
Controlling Person of a trust — trustee		
Controlling Person of a trust — protector		
Controlling Person of a trust — beneficiary		
Controlling Person of a trust — other		
Controlling Person of a legal arrangement (non-trust) — settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) — trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) — protector-equivalent		
Controlling Person of a legal arrangement (non-trust) — beneficiary equivalent		
Controlling Person of a legal arrangement (non-trust) — other-equivalent		

SECTION 5: DECLARATIONS AND UNDERTAKINGS*

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

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

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

DATA PROTECTION — CUSTOMER INFORMATION NOTICE

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

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

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

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

Further information is available on the OECD website: <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*:

Capacity (if Controlling Person)*:

Date (dd/mm/yyyy)*: _____

APPENDIX I FUND DATA PRIVACY NOTICE

This notice sets out how GQG Global UCITS ICAV (the "Fund") will process personal information (as a Data Controller)

Where your details are provided to the Fund as a consequence of your investment in or inquiries relating to the Fund, then the Fund, acting as a data controller may itself (or through a third party such as Bridge Fund Management Limited (the "Management Company") acting in its capacity as the Fund's management company and Distributor, Northern Trust International Fund Administration Services (Ireland) Limited (the "Administrator") acting in its capacity as the Fund's administrator, GQG Partners LLC (the "Distributor"), acting in its capacity as the Fund's distributor or such other entities or third parties as may be appointed by the Fund, including by any of the entities listed in the directory of the Prospectus (together the "Fund Service Providers") collect, use and otherwise process your Personal Data or that of your directors, officers, employees and/or beneficial owners (collectively "Personal Data"). When processing your Personal Data, there may also be times where a Fund Service Provider will act as a data controller, such as Northern Trust Fiduciary Services (Ireland) Limited, in its capacity as the Fund's Depository (the "Depository").

In connection with all of the foregoing, please note the following:

PURPOSES OF PROCESSING AND LEGAL BASIS FOR PROCESSING

Your Personal Data may be processed by the Fund or by or on behalf of Fund Service Providers (or any of their affiliates, agents, employees, delegates, sub-contractors or group entities) for the following purposes:

- to facilitate the opening of your account with the Fund, the management and administration of your holdings in the Fund and any related account on an on-going basis (the "Services") which are necessary for the performance of your contract with the Fund, including without limitation the processing of redemption, conversion, transfer and additional subscription requests, the payment of distributions and mailing related materials to you;
- in order to carry out anti-money laundering ("AML") checks and related actions which the Fund or Fund Service Providers considers appropriate to meet any legal obligations imposed on them in relation to, the prevention of fraud, money laundering, terrorist financing, bribery, corruption, tax evasion and to prevent the provision of financial and other services to persons who may be subject to economic or trade sanctions, on an on-going basis, in accordance with the Fund and the Fund Service Provider's anti-money laundering procedures;
- to report tax related information to tax authorities in order to comply with a legal obligation;
- to monitor and record calls and electronic communications for (i) processing and verification of instructions, (ii) investigation and fraud prevention purposes, (iii) for crime detection, prevention, investigation and prosecution, and (iv) to enforce or defend the rights of the Fund or the Fund Service Providers. Processing carried for such purposes may be undertaken where necessary for the performance of your contract with the Fund and in order for the Fund or Fund Service Provider to comply with any legal obligation to which it is subject;
- in connection with legal or regulatory proceedings, such as responding to a subpoena or request from the Central Bank of Ireland, where necessary for the purposes of complying with a legal or regulatory obligation to which the Fund or Fund Service Provider is subject;
- to disclose information to other third parties such as Fund Service Providers, regulatory authorities and technology providers in order to comply with any legal obligation imposed on the Fund or them, or in order to pursue the legitimate interests of the Fund;
- to monitor and record calls for quality control, business and statistical analysis, training and related customer services purposes in order to pursue the legitimate interests of the Fund to improve its service delivery;
- for marketing purposes including to provide tailored experiences and advertisements about the products and services offered by the Fund or Fund Service Providers where such processing is necessary for the purposes of pursuing the legitimate interests of the Fund or the Fund Service Providers;

- to update and maintain the Fund's records and fee calculation where necessary for the performance of your contract with the Fund and for the purposes of complying with a legal obligation to which the Fund/Fund Service Provider is subject and as necessary for the legitimate interest of maintaining accurate records;
- to retain AML and other records of individuals to assist with the subsequent screening of them by the Administrator including in relation to other funds or clients of the Fund Service Providers in pursuance of the Fund's and the Fund Service Provider's legitimate interests;
- or which are otherwise necessary to comply with the Fund or a Fund Service Provider's legal obligations and/or which are necessary for the Fund or a Fund Service Provider's legitimate interests indicated above and/or the processing is in the public interest.

RECIPIENTS OF DATA AND INTERNATIONAL TRANSFER OF DATA

The Fund may disclose your Personal Data as follows:

- to its delegates and service providers, including the Fund Service Providers, their affiliates, agents, sub-delegates and group entities, and other third party service providers engaged by the Fund in order to process the data for the above mentioned purposes;
- and to competent authorities (including the Office of the Data Protection Commissioner, the Central Bank of Ireland, the Revenue Commissioners), and such other courts bodies and tax authorities as required by law or requested for internal investigations and reporting.

The disclosure of Personal Data to the third parties set out above may involve the transfer of data to the USA and other jurisdictions outside the European Economic Area (EEA) in accordance with the requirements of the General Data Protection Regulation (EU 2016/679). Such countries may not have the same data protection laws as the EEA or your jurisdiction. The Fund has authorised each of the Management Company, the Administrator, the Distributor and the Fund's other service providers as its agent to put in place Standard Contractual Clauses with relevant parties to whom Personal Data will be transferred. Please contact the Management Company, the Administrator, the Distributor or the Fund's other service providers for copies of the Standard Contractual Clauses that have been entered into by them on behalf of the Fund.

RETENTION PERIOD

The Fund and the Fund Service Providers will retain your Personal Data for as long as required for any of them to perform the services for which they are appointed or perform investigations in relation to same depending on whether additional legal/regulatory obligations mandate that the Fund/Fund Service Provider retains your Personal Data for a specified period.

DATA SUBJECT RIGHTS

You have the following rights, in certain circumstances, in relation to your Personal Data:

- Right to access your Personal Data.
- Right to rectify your Personal Data.
- Right to restrict the use of your Personal Data (in certain specific circumstances).
- Right to request that your Personal Data is erased (in certain specific circumstances).
- Right to object to processing of your Personal Data (in certain specific circumstances).
- Right to data portability (in certain specific circumstances).

Where the Fund or the Fund Service Provider requires your Personal Data to comply with AML or other legal requirements or proceedings, failure to provide this information means the Fund may not be able to accept you as an investor in the Fund or any of its sub-funds, or it may need to terminate the business relationship.

You have the right to lodge a complaint with a supervisory authority in the EU Member State of your habitual residence or place of work or in the place of the alleged infringement if you consider that the processing of Personal Data carried out by the Fund or the Fund Service Providers infringes the General Data Protection Regulation.

CHANGE OF PURPOSE

If it becomes necessary to use your Personal Data for a purpose that is unrelated to the original purpose(s) for which it was provided as contemplated above (Purposes of Processing and Legal basis for processing) you will be notified with details of the legal basis for doing so.

HOW YOUR PERSONAL DATA IS COLLECTED

Personal Data may be collected from you on behalf of the Fund from the details required on the subscription application form of the Fund but also whenever you interact with the Fund, the Fund Service Providers or any other third parties in connection with your investment, including when you visit the Fund website, request literature or call a service provider.

WITHDRAWAL OF CONSENT

You may object to the processing of your Personal Data where the Fund or Fund Service Provider considered this to be necessary for the purpose of its legitimate interests. In such circumstances your Personal Data will only be processed on behalf of the Fund in accordance with another legal basis which will be notified to you on request.

CHANGES TO THIS PRIVACY NOTICE

This privacy notice may be updated at any time. In such circumstances an updated version will be posted to the Fund's website and where substantial updates are being undertaken details will also be provided to you directly.

HOW TO CONTACT US

This privacy notice was prepared with brevity and clarity in mind and is not an exhaustive account of all aspects of how Personal Data is processed for the Fund. If you have any questions about our use of your Personal Data, please contact us at clientservices@gqgpartners.com.

APPENDIX II

GQG GLOBAL UCITS ICAV (the “Fund”)

TERMS AND CONDITIONS OF SERVICE FOR INSTRUCTIONS ISSUED TO THE ADMINISTRATOR VIA EMAIL

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 is GQGTInstructions@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 GQGTInstructions@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.
 - The task number acknowledges receipt of the Investor’s instruction.
 - The task number is not confirmation of placement of the instruction.
 - 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.
 - 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.
4. 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.