

NICHEJUNGLE ICAV

INITIAL SUBSCRIPTION FORM (the “Subscription Form”)

NicheJungle ICAV (the “ICAV”)

Carne Fund Managers (Ireland) Limited (the “Manager”)

Applicants must read the ICAV’s Prospectus (including the Fund Supplement) and the relevant Key Investor Information Document (“KIID”) before completing the Subscription Form

**Please complete this Subscription Form in BLOCK CAPITALS and send it to:
Caceis Ireland Limited (the “Administrator”)**

Bloodstone Building Sir John Rogerson’s Quay Dublin D02 KF24 Ireland

Tel. No: +353 (0)1 6721600 Fax No: +353 (0)1 7900461

Email/ Queries: FB-REG-IRELAND2@CACEIS.COM

Defined terms used but not defined in this Subscription Form are those used in the Prospectus of the ICAV (as amended from time-to-time) and the Fund Supplement (as amended from time-to-time) (unless the context otherwise requires).

Process for Application

Applications for Shares should be made by completing a Subscription Form which should be submitted to the Administrator by facsimile or electronic mail as a PDF attachment as set out below in this Subscription Form so as to be received by the Administrator no later than the Dealing Deadline.

The Directors, in their absolute discretion and in exceptional circumstances only, may accept an application form received after the Dealing Deadline but before the Valuation Point for the relevant Dealing Day. Subscription proceeds should be received by the Fund prior to the paid Subscription Settlement Date.

While the Administrator accepts facsimile and electronic mail copies, prospective investors should be aware of the risks associated with sending documents in this manner, which are as set out in the Prospectus of the ICAV.

Once submitted, applications shall, subject to applicable law and regulation, be irrevocable by, and binding on, the applicant.

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Bank Standard Settlement Instructions (for Total Subscription Payments Due)
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EUR

Direct via Target II

By MT202 (without IBAN)

57A Account with Institution FI BIC: //RT

ISAEIE2D

58A Beneficiary Name & Address: ISAEIE2D

Or

By MT103 (with IBAN)

57A Account with Institution FI BIC: //RT

ISAEIE2D

59 Beneficiary Name & Address: //E80 ISAE 9903 2500 0005 61

ISAEIE2D

GBP

Correspondent Bank: HSBC Bank Plc

Correspondence Swift Code: MIDLGB22

Correspondence Sort Code: 40-05-15

IBAN: GB56MIDL40051576888255

Account No: 76888255

Beneficiary Bank: CACEIS Bank – Ireland Branch Beneficiary Swift Code: ISAEIE2D

Beneficiary Name: Nichejungle ICAV

The minimum initial investment amounts for each class of Shares are as specified in the Supplement for the relevant Fund.

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Part 1: Investor Names in which Shares are to be registered (the “Applicant”)

Type of Investor (please tick):	
Individual	☐
Corporates	☐
Institutional	☐
Other	☐
Charities & PRSAs	☐

Either: Individual Investor Applicant(s):

Full Name of First Applicant:	Full Name of Second Applicant (if applicable):
Occupation:	Occupation:
Postal Address:	Postal Address (if different from ‘first Individual’)
Post Code:	Post Code:
Contact E-mail address:	Contact E-mail address:
Telephone No:	Fax No:
Country of Residence of ‘Beneficial Owner’ for tax purposes:	Country of Residence of ‘Beneficial Owner’ for tax purposes:
Tax Identification Number:	Tax Identification Number:

or: Corporate Applicant:

Entity Name (if applicable):	
Country of Domicile:	Registration No:
Postal Address:	
Registered Address:	
Post Code:	
Contact Name:	

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Contact E-mail address:		
Telephone No:		Fax No:

or: Institutional Applicant:

Entity Name (if applicable):	
Country of Domicile:	Registration No:
Postal Address:	
Registered Address:	
Post Code:	
Contact Name:	
Contact E-mail address:	
Telephone No:	Fax No:

or: Other:

Entity Name (if applicable):	
Country of Domicile:	Registration No:
Postal Address:	
Registered Address:	
Post Code:	
Contact Name:	
Contact E-mail address:	
Telephone No:	Fax No:

or: Charities and PRSAs:

Entity Name (if applicable):	
Country of Domicile:	Registration No:
Postal Address:	

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Registered Address:	
Post Code:	
Contact Name:	
Contact E-mail address:	
Telephone No:	Fax No:

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Part 2: Authorised Signatories for Documents (required for Institutional Investors only)

Name	Title	Signature

Part 3: Initial Subscription Information

Investment details	Fund Name..... Class Name..... Class ISIN.....
Investment amount in figures and words	Stg£/€..... (delete as appropriate) GBP/Eur..... (delete as appropriate)
<u>OR</u>	
Number of shares in figures and words	 Shares (figures) Shares (words)

Part 4: Your Bank Account - Standard Settlement Instruction Details (complete as applicable)

Correspondent Bank:	
SWIFT/ABA Number:	
Beneficiary Bank:	
SWIFT Code:	
Sort Code:	
Account Name:	
BIC Code: (if required):	
IBAN Number (if required):	
Account Number:	

Part 5: Anti-Money Laundering Requirements

The Administrator and the ICAV are subject to the anti-money laundering legislation and regulations in multiple jurisdictions and have adopted global policies and procedures which uses the best practices of international and European initiatives to counter money laundering and terrorist financing which may be of a standard that is higher than required under anti-money laundering and counter-terrorist financing legislation (“**AML Policy**”) To ensure compliance with applicable statutory requirements relating to anti-money laundering and anti-terrorism initiatives and the AML Policy, the Administrator, on behalf of the ICAV, will require verification of identity and source of funds from all prospective investors. By way of example, an individual will be required to produce a copy of a passport or identification card which may be required to be certified, together with evidence of his address such as a utility bill or bank statement. In the case of corporate applicants this may require production of a certified copy of the Certificate of Incorporation (and any change of name) and of the Memorandum and Articles of Association (or equivalent), and of the names and residential and business addresses of all directors and beneficial owners.

The details given above are by way of example only and the Administrator will request such information and documentation as it considers is necessary to verify the identity of an applicant and comply with all applicable money laundering regulations and the AML Policy. In the event of delay or failure by the applicant to produce any information required under applicable law or the AML Policy, the Administrator may refuse to accept the application and the subscription monies relating thereto or may refuse to process a redemption request until proper information has been provided. In the event that an investor requests that redemption proceeds be paid to an account in the name of the investor the details of which the Administrator does not already possess, the Administrator may request such written information and documents (which may be required in hard copy) as it reasonably requires to verify such account, and redemption proceeds will not be paid to such account if the investor fails to provide such information. Investors should note specifically that redemption proceeds will not be remitted to an account which is not in the name of the investor.

As mentioned above, the ICAV, or the Administrator, reserves the right to request such evidence as is necessary to verify the identity and source of funds of a prospective investor in accordance with applicable law or the AML Policy. The ICAV or the Administrator also reserves the right to request such verification evidence in respect of a transferee of Shares. In the event of delay or failure by the prospective investor or transferee to produce any evidence required under applicable law or the AML Policy, the ICAV or the Administrator may refuse to accept the application or (as the case may be) to register the relevant transfer, and (in the case of a subscription of Shares) any funds received will be returned without interest to the account from which such funds were originally debited.

If, as a result of any information or other matter which comes to his attention during the course of his business, trade, profession or employment, any investor or related person (including the ICAV, its Directors and the Administrator) knows or suspects that payment to the Fund (by way of subscription or otherwise) is the proceeds of criminal conduct, such person is required to report such information. Such report shall not be treated as a breach of any restriction upon the disclosure of information imposed by law or otherwise.

Part 6: Data Protection

In accordance with the General Data Protection Regulation ((EU) 2016/679) of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data, and repealing Directive 95/46/EC also known as “**GDPR**” and applicable Irish data protection legislation which currently means the Irish Data Protection Acts 1988 to 2018 collectively “**Data Protection Legislation**”, the ICAV being a data controller, must provide you with information on how the personal data that you provide as part of your subscription for shares of the Fund, will be processed by the ICAV, its service providers and delegates and their duly authorised agents and any of their respective related, associated or affiliated companies.

As a consequence of your investment, the ICAV acting as a data controller may itself or through third parties including but not limited to the Manager, Administrator, the Investment Manager, the money laundering reporting officer, local paying agents and mailing firms appointed by any of the foregoing together the “**Service Providers**” process your personal information, or to the extent that you are a non-natural person, that of your directors, officers, employees, intermediaries and/or beneficial owners.

In certain circumstances, the Administrator may use your personal data where this is necessary for compliance with a legal obligation to which they are directly subject (i.e. to comply with applicable anti-money laundering or counter-terrorist financing laws or where mandated by a court order or regulatory sanction). The Administrator, in respect of this specific use of personal data, would also act as a data controller of your personal data. In such circumstances, all rights afforded to you as a data subject under the GDPR shall be solely exercisable against the Administrator.

Details of how the Administrator may use your data are set out in its privacy notice available on its website. For convenience, please see the following link:

<https://www.caceis.com/fileadmin/documents/pdf/Regulatory-Environment/Data-Privacy-Notice-May18.pdf>

For the avoidance of doubt, this Data Privacy Statement is issued by the Administrator and is without prejudice to any obligations which any of the Service Providers have to their own data subjects under the GDPR.

Purpose of Processing and Legal Basis for Processing

Your personal data will be processed for any one or more of the purposes listed below, where such processing is based on your consent, or is in the ICAV’s or the Service Providers’ legitimate interests, or is necessary for the performance of your contract for the implementation of pre-contractual measures taken in response to a request by you, or is required by law or the public interest:

- to facilitate the opening of your account with the ICAV, the management and administration of your holdings in the ICAV and any related account on an on-going basis (the “**Services**”) which are necessary for the performance of your contract with the ICAV, including without limitation the processing of redemption, conversion, transfer and additional subscription requests and the payment of distributions;
- in order to carry out anti-money laundering checks and related actions which the ICAV considers appropriate to meet any legal obligations imposed on the ICAV relating to, or the processing in the public interest or to pursue the ICAV’s legitimate interests in

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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 Manager's and the Administrator's anti-money laundering procedures (each of which adopt such procedures for and on behalf of the ICAV);

- to report tax related information to tax authorities in order to comply with a legal obligation. Your information may also be divulged to the tax authorities in accordance with the requirements of FATCA and/or OECD Common Reporting Standard;
- to monitor and record calls and electronic communications that you make to and receive from the ICAV, the Service Providers, providers and their delegates or duly appointed agents and any of their respective related, associated or affiliated companies for (i) processing and verification of instructions, (ii) investigation and fraud prevention purposes, (iii) for crime detection, prevention, investigation and prosecution, (iv) quality assurance, (v) training and related purposes (vi) dispute resolution, (vii) to enforce or defend the ICAV, the Manager and its affiliates, itself or through third parties to whom it delegates such responsibilities or rights in order to comply with any legal obligation imposed on the ICAV, (v) to pursue the ICAV's legitimate interests in relation to such matters or (vi) where the processing is in the public interest;
- to disclose information to other third parties such as Service Providers, auditors, tax advisers, legal advisers, regulatory authorities and technology providers in order to comply with any legal obligation imposed on the ICAV or in order to pursue the legitimate interests of the ICAV;
- to update and maintain records and fee calculation;
- to retain AML and other records of investors to assist with the subsequent screening of them by the Administrator on behalf of the ICAV in pursuance of the Administrator's and its clients' legitimate interests and which are necessary to comply with the ICAV or the Administrator's legal obligations and/or which are necessary for the ICAV or the Administrator's legitimate interests indicated above and/or the processing is in the public interest.

Please note that where personal data is processed for purposes of legitimate interests, you have a right to object to such processing and the ICAV and the Service Providers will no longer process the personal data unless it can be demonstrated that there are compelling legitimate grounds for the processing which override your interests, rights and freedoms or for the establishment, exercise or defence of legal claims.

The Applicant also agrees to notify the ICAV, the Manager and the Administrator of any change to their tax residency status (for tax residency definitions see **Appendix 2**).

Recipients of Data and International Transfer of Data

The ICAV may disclose your personal information as follows:

- to the Service Providers, including the Administrator, and their affiliates, and other third party service providers engaged by the ICAV and/or the Manager in order to process the data for the above mentioned purposes; and
- to competent authorities (including tax authorities), courts and bodies as required by law or requested or for reporting purposes.

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The disclosure of personal information to the third parties set out above may involve the transfer of data to the USA and other jurisdictions outside the EEA in accordance with the requirements of the GDPR. Such countries may not have the same data protection laws as your jurisdiction. Any transfers of personal data outside the EEA by or on behalf of the ICAV will be in accordance with the GDPR, which specifies a number of safeguards to be applied to such transfers, including the use of standard contractual clauses (also known as 'model clauses'). The ICAV has authorised the Administrator as its agent to put in place standard contractual clauses with relevant parties to whom personal data may be transferred. Please contact the Administrator for copies of any standard contractual clauses entered into on behalf of the ICAV.

Profiling and Screening

The ICAV and its Service Providers, may screen investors in the ICAV to ascertain if those investors are politically exposed persons ("**PEP**") or are subject to financial sanctions under EU or other laws, for the purposes of complying with AML legislation and with United Nations, EU and other applicable sanctions regimes. The implementation of such PEP and financial sanctions screening programmes may result in the ICAV or its Service Providers refusing an application for Shares in the ICAV or delaying or refusing to make any redemption or distribution payment to you if you, your directors or any beneficial owner or your Shares appear on such screening programmes. In the event that you are identified as a PEP as a result of the screening process, you may be required to provide additional information and/or documentation to the ICAV or its Service Providers. Such processing, which may reveal your political opinion, is considered lawful on the grounds of substantial public interest under Article 9(2)(g) of the GDPR.

Undertaking in connection with other parties

By accepting to provide personal data to the ICAV, you undertake to be authorised to disclose to the ICAV relevant information applicable to the beneficial owner of the investment, to your directors and authorised signatories and to persons that own, directly or indirectly, an interest in the ICAV. In this respect, you confirm that you have provided these persons with all the information required under applicable data protection law, notably regarding their data protection rights, and received from those persons their authorisation for the processing and transfer of their personal data to us.

Your data protection rights

You have the following rights, in certain circumstances, in relation to your personal information:

- Right to access your personal information. The ICAV will provide you with a copy of the personal data it holds on you as data controller as soon as practicable and in any event not more than one month after a valid written request received from you. Generally, the ICAV will not charge an investor to access personal data, except where a request is manifestly unfounded or excessive. The ICAV may request proof of identification to verify an access request;
- Right to rectify your personal information;
- Right to restrict the use of your personal information (in certain specific circumstances);
- Right to request that your personal information is erased (in certain specific circumstances);

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- Right to object to processing of your personal information (in certain specific circumstances); and
- Right to data portability (in certain specific circumstances) in order to transfer your personal data to another data controller in a structured, commonly used and machine-readable format where this is technically feasible, subject to certain conditions.

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 relating to you carried out by the ICAV or its Service Providers infringes the GDPR.

Failure to provide personal data

As outlined above, the provision of personal data by you is required for us to manage and administer your holdings in the ICAV and so that we can comply with legal, regulatory and tax requirements referred to above. Where you fail to provide such personal data in order to comply with AML/CTF or other legal requirements, in certain circumstances, we may be prohibited from making redemption or any applicable dividend payments to you and/or may be required to discontinue our business relationship with you by compulsorily redeeming your shareholding in the ICAV.

Retention period

The ICAV, the Manager and the Administrator will retain your personal information for as long as required for the ICAV, the Manager or the Administrator to perform the Services or perform investigations in relation to same and for as long as the ICAV, the Manager and Administrator is required to retain your personal data in accordance with their legal or regulatory obligations.

How to contact us

If you have any questions about our use of your personal information, or you wish to exercise your data subject rights, please contact us at compliance@nicheam.com.

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Part 7: Declaration of Residence Outside Ireland

This section must be completed and signed. Please refer to **Appendix 2** for residence definitions for tax purposes.

Any Applicant resident outside Ireland is required by the Irish Revenue Commissioners to make the following declaration which is in a format authorised by them, in order to receive payment without deduction of tax.

Note – If you are an Irish resident who will not cause the ICAV to have an obligation to deduct and pay tax to the Irish Revenue Commissioners (“**Exempt Irish Investor**”) please tick the following box, complete either **Schedule B** or **Schedule C** (whichever is appropriate) of this form and then proceed to Part 9.

It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of Shares. Terms used in this declaration are defined in Part 9 of this form. Please tick which section is applicable and sign below:

☐ **Declaration on own behalf** (* Please delete as appropriate)

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

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

☐ **Declaration as Intermediary** (* Please delete as appropriate)

I/We* declare that I am/we are* applying for Shares on behalf of persons:

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

I/We* also declare that:

- unless I/we* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us* from the date of this application will be made on behalf of such persons; and
- I/we* will inform you in writing, if I/we* become aware that any person, on whose behalf I/we* hold(s) Shares, becomes resident in Ireland.

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, this Subscription Form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the Applicant. Where there is more than one

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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 this Subscription Form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, a copy of the power of attorney must be furnished in support of the signature.

**Signature of First Applicant /
Authorised Signatory / Intermediary:**

**Signature of Second Applicant /
Authorised Signatory / Intermediary:**

Name (Please Print):

Name (Please Print):

**Capacity of Authorised Signatory (if
applicable):**

**Capacity of Authorised Signatory (if
applicable):**

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

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

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Part 8 – Declaration Referred to in Section 739D(6), Taxes Consolidation Act, 1997

Irish Resident Entities Composite Declaration Form

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

I declare that the information contained in this declaration is true and correct.

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

- ☐ A pension scheme
- ☐ A company carrying on life business within the meaning of section 706 TCA; 1997;
- ☐ An investment undertaking
- ☐ 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 as defined in section 739B (1)
- ☐ Entitled to exemption from income tax and capital gains tax by virtue of section 784A (2) TCA, entitled to exemption from income tax and capital gains tax by virtue of section 784A (2) TCA, 1997* or by virtue of section 848E TCA, 1997* (see further requirements for Qualifying Fund Manager/Qualifying Savings Manager below). * Delete as appropriate
- ☐ A PRSA Administrator
- ☐ A credit union within the meaning of section 2 of the Credit Union Act 1997

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

I also declare that at the time of making this declaration, the Shares in respect of which this declaration is made are held for charitable purposes only; and

- form part of the assets of a body of persons or trust treated by the Revenue Commissioners as a body or trust established for charitable purposes only; or
- are, according to the rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Revenue Commissioners.

I undertake that, in the event that the person referred to in paragraph (7)(d) 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 ICAV accordingly.

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Additional requirements where the declaration is completed on behalf of a qualifying fund manager / qualifying savings manager/PRSA Administrator:

I/We* also declare that at the time this declaration is made, the Shares in respect of which this declaration is made:

- are assets of an *approved retirement fund/an approved minimum retirement fund or a special savings incentive account or a PRSA; and
- are managed by the Declarant for the individual named below who is beneficially entitled to the Shares.

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

Additional Requirements where the declaration is completed by an Intermediary:

I/We* declare that I am/we are* applying for Shares on behalf of persons who:

- to the best of my/our knowledge and belief, have beneficial entitlement to each of the Shares in respect of which this declaration is made; and
- is a person referred to in section 739D (6) TCA, 1997.

I/We* also declare that:

- unless I/we* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us* from the date of this application will be made on behalf of persons referred to in section 739D(6) TCA, 1997; and
- I/we* will inform you in writing if I/we* become aware that any person ceases to be a person referred to in section 739D (6) TCA, 1997.

* Delete as appropriate

Name of Applicant:
Irish tax reference number of Applicant:
Authorised signatory (declarant):
Title: (Mr/Ms/etc.)
Capacity in which declaration is made:
Date:

Important Notes:

- 1 This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration.

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- 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/qualifying savings manager, quote the tax reference number of the beneficial owner of the Shares.
- 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. It must also be signed by a qualifying fund manager of an approved retirement fund/an approved minimum retirement fund, by a qualifying savings manager of a special savings account or by a 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. If the latter, a copy of the power of attorney should be furnished in support of this declaration.

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Part 9: Declaration referred to in section 739D (6), Taxes Consolidation Act, 1997 for an Irish resident company

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

- I declare that the information contained in this declaration is true and correct.
- I also declare that I am applying for the Shares on behalf of the Applicant named below who is entitled to the shares in respect of which this declaration is made and is a person referred to in section 739D (6) of the Taxes Consolidation Act, 1997, being a person who is a company that is or will be within the charge to corporate tax in accordance with section 739(G) (2), in respect of payments made to it by the ICAV or Fund.

Additional requirements where the declaration is completed by an intermediary:

- I/We* declare that I am/we are* applying for Shares on behalf of persons who:

to the best of my/our knowledge and belief, have beneficial entitlement to each of the Shares in respect of which this declaration is made; and Is a person referred to in section 739D (6) TCA, 1997.

- I/We* also declare that:

unless I/we* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us* from the date of this application will be made on behalf of persons referred to in section 739D (6) TCA 1997; and

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

*Delete as appropriate

Name of Applicant:
Irish tax reference number of Applicant:
Authorised signatory (declarant):
Title: (Mr/Ms/etc.)
Capacity in which declaration is made:
Date:

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Part 10: Declaration of Beneficial Ownership

This is the declaration for the investment in the Fund. Please tick **option A or B** if applicable. It is important to note that this declaration, if it is then correct, shall apply in respect of any subsequent acquisitions of Shares in the Fund. The Applicant confirms that he/she/it is acting as *(please tick one)*:

A Declaration on own behalf ☐

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

B Declaration as Intermediary ☐

I/We* declare that:

- I am/we are* applying for Shares in the Fund on behalf of persons Who are beneficially entitled to the Shares; and
- unless I/we* specifically notify you to the contrary at the time of the application, all applications for Shares in the Fund made by me/us from the date of the application will be made on behalf of such persons;
- I am/we have* verified the identity of the named investor, consistent with anti-money laundering regulations in Ireland or, if they are at least equivalent, of the jurisdiction of sale;
- I/we have* documentation to support the investor identification, can produce it on demand and will hold it for at least five years after the final transaction on this account;
- I/we have* identified all parties owning or controlling 25% or more of the equity or the voting rights of the investor, and all parties that in turn own or control 25% or more of the equity or voting rights of the parties described, and agree to provide documentation on all of these parties that is satisfactory to the ICAV;
- I/we have* the power and authority to act on behalf of the investors in relation to all matters regarding this application and investment; and
- I/we* agree to notify the ICAV immediately should my/our relationship with the investor end.

*Delete as appropriate

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Part 11: Authorisation (This part must be completed and signed)

By signing below, the Applicant agrees to be bound by the Terms, Conditions, Declarations, Representations, Consents and Indemnities set out above and overleaf in **Schedule A** (and **Schedule B** and **Schedule C**, if Irish Resident).

Signature of First Applicant /
Authorised Signatory / Intermediary:

Signature of Second Applicant /
Authorised Signatory / Intermediary:

Name (Please Print):

Name (Please Print):

Capacity of Authorised Signatory (if
applicable):

Capacity of Authorised Signatory (if
applicable):

To be completed by the Introducer only (if applicable) :

Introducer Name:

Telephone No:

E-mail Address:

Address:

Post Code:

Stamp (if applicable)

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Part 10: Next Steps

(Tick Box)

- ☐ Ensure that any relevant declarations in Schedules A, B, and C have been completed (if applicable).
- ☐ Arrange for this Form and certified AML / KYC verification documentation to be scanned and sent as an email attachment to the Administrator at the following email address:

FB-REG-IRELAND2@CACEIS.COM
- ☐ For EU resident private shareholders only – Provide documentary evidence of national insurance number(s).

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Schedule A: Representations, Warranties, Consents, Indemnities and Acknowledgements
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By signing this Subscription Form the Applicant represents and warrants to the Administrator, the Manager, the appointed introducer (if any), and the ICAV and its Directors, in the terms set out below (the “**Applicant’s Warranties**”), that each and every one of the Applicant’s Warranties is true, accurate and not misleading in all respects.

1. The Applicant confirms that it is aware of the risk involved in the proposed investment and of the fact that inherent in such investment is the potential to lose some or all of the sum invested.
2. In the case of it being a company or other entity, the Applicant is duly incorporated or established and validly existing under the laws of its jurisdiction of incorporation or establishment and it has the power, authority and capacity to enter into and perform its obligations under this Subscription Form.
3. The Applicant has taken all necessary actions (including the obtaining of any necessary consent) in order to authorise entry into this investment, the delivery of this Subscription Form, and any transactions contemplated by it.
4. This Subscription Form constitutes legal, valid and binding obligations on the Applicant, subject, in the event of insolvency or analogous proceedings, to applicable laws relating to creditors rights and to limitations on the availability of any equitable remedies.
5. The Applicant confirms and warrants to the Administrator, the Manager and the appointed introducer (if any), the ICAV and its Directors that the responsibility for a) ensuring that any investment it makes in the Fund complies with the Applicant’s local regulatory or statutory requirements that govern the application and b) taking appropriate taxation advice, rests solely and exclusively with the Applicant. The Applicant confirms that the Administrator, the Manager, the appointed introducer (if any), the ICAV and its Directors shall incur no liability whatsoever in this regard and the Applicant indemnifies each of the Administrator, the Manager, the appointed introducer (if any), the ICAV and its Directors individually against any loss, liability, cost or expense that each of them may incur jointly or severally by reason of any breach of any regulatory or statutory requirement in the Applicant’s jurisdiction relating to this Subscription Form, such breach caused by the Applicant’s acts or omissions.
6. The Applicant confirms and warrants to the Administrator, the Manager and the appointed introducer (if any), the ICAV and its Directors that no actions or administrative proceedings before any court or agency have been started or threatened in any jurisdiction, which if adversely determined against the Applicant are likely to have a material adverse effect on the Applicant or their ability to observe or perform their obligations under this Subscription Form.
7. The Applicant confirms and warrants to the Administrator, the Manager and the appointed introducer (if any), the ICAV and its Directors that, in relation to all tax, legal and economic considerations in relation to or concerning this Subscription Form and the proposed activities of the ICAV, they have relied, and will rely, only on the advice of their own professional advisers.
8. The Applicant, having read, received, considered and understood a copy of the Prospectus, the Fund Supplement thereto, the KIID current at the date of this Subscription Form, (incorporated herein by reference), confirms that this application is based solely on the Prospectus and the Fund Supplement together with the most recent

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annual report and accounts of the ICAV (where applicable and where actually provided to the Applicant). In particular the Applicant acknowledges that the value of and income from Shares in the Fund may go up or down and the Applicant may not get back the amount invested in the Fund.

9. The Applicant confirms that a copy of the KIID has been supplied to him/her and that he/she has the KIID. The Applicant acknowledges that the updated KIID is available and is provided on the ICAV's website at www.nichejungle.com and that I/we* will read and review the most up-to-date version of the KIID prior to making any subsequent application for shares in the A, AB, AC, ACP (GBP), AF, AFP (GBP), AD, ADP (GBP), I, IP (GBP), or Q Share classes (as appropriate) of the Fund.
10. The Applicant undertakes to observe and be bound by the provisions of the Instrument of Incorporation (as amended from time to time) constituting the ICAV together with the Prospectus of the ICAV, Supplement and KIID for the Fund. The Applicant hereby applies to be entered in the Register (as defined in the Instrument of Incorporation) as the holder(s) of the Shares issued pursuant to the acceptance by the Administrator, the Manager, the ICAV and its Directors of this Subscription Form and subsequent subscriptions.
11. The Applicant confirms and warrants to the Administrator, the Manager and the appointed introducer (if any), the ICAV and its Directors that they are purchasing Shares for investment purposes and solely for their own account and not with a view to (nor at present the intention of) reselling them, except in the case of a redemption by the Fund of Shares.
12. The Applicant agrees to provide all necessary details, information, documents and co-operation requested by the ICAV or its duly authorised delegates in order to determine beneficial ownership as defined in the European Union (Anti-Money Laundering: Beneficial Ownership of Corporate Entities) Regulations 2019 (S.I. No 110 of 2019) (the **"Beneficial Ownership Regulations"**). The Applicant acknowledges that it is an offence under the Beneficial Ownership Regulations for a beneficial owner to fail to comply with the terms of a beneficial ownership notice received from or on behalf of the ICAV or to provide materially false information in response to such a notice or to fail to comply with his/her obligations to provide relevant information to the ICAV as to his/her status as a beneficial owner or changes thereto in certain circumstances or in purporting to comply, to provide materially false information.
13. The Applicant acknowledges that, by providing the email address (es) and fax number(s) in Part 1 of this Subscription Form, the ICAV may serve formal notices on them by this means and at this address/number or such other address/number as may be advised to the Manager in writing from time to time. The Applicant also acknowledges that any notice or document may be served by the ICAV on them in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000, if the Applicant has provided an email address or fax number to the ICAV or its delegate, consent to any such notice or document being sent to them by fax or electronically to the fax number or email address previously identified to the ICAV or its delegate which the Applicant acknowledges will constitute effective receipt by them of the relevant notice or document. The Applicant further acknowledges that they are not obliged to accept electronic communication and may at any time choose to revoke their agreement to receive communications by fax or electronically by notifying the ICAV in writing at the above address provided that their agreement to receive communications by fax or electronically shall remain in full force and effect pending receipt by the ICAV of written notice of such revocation.

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14. The Applicant acknowledges that failure to provide all requested documentation will result in this Subscription Form being refused. Applicants will be notified by facsimile transmission, email or by mail of such refusal. The Administrator, the Manager and the ICAV and its Directors shall be held harmless and indemnified against any loss arising from the refusal of an application where requested documentation is not provided.
15. The Applicant acknowledges that instructions for the purchase of Shares in the Fund must be received by **no later than the Dealing Deadline** for subscription, as such term is defined in the relevant Supplement to the Prospectus.
16. The Applicant acknowledges that if payment in full in cleared funds in respect of an application has not been received by the Administrator in accordance with the terms of the Supplement for the Fund or in the event of non-clearance, any provisional allotment of shares made in respect of such application may be cancelled. In such circumstances, the Directors may charge the Applicant for any expense incurred by the ICAV or Fund and for any loss to the ICAV or Fund arising out of such non receipt or non-clearance as described fully in the Prospectus.
17. The Applicant hereby indemnifies and keeps indemnified the Administrator, the Manager, the ICAV and its Directors, other shareholders of the Fund and any affiliates or duly appointed agents of any of the foregoing entities for any and all loss suffered by them as a result of the Applicant acquiring or holding Shares in the Fund where, by virtue of so acquiring or holding the Applicant is in breach of the laws of any competent jurisdiction.
18. The Applicant hereby authorises and instructs each of the Administrator, the Manager, the ICAV and its Directors to accept and execute any instructions in respect of the Shares to which this Subscription Form relates (whether applied for now or subsequently) given by an Authorised Signatory as designated herein in written form or by facsimile or by email attachment, and the Applicant consents and warrants to send the Subscription Form and supporting documentation (in relation to money laundering prevention checks and know-your-customer requirements) promptly to the Administrator before the Dealing Deadline for subscriptions.
19. The Applicant undertakes to the Administrator, the Manager and the appointed introducer (if any), the ICAV and its Directors that settlement of subscription payments will only be instructed from the nominated bank account(s) as detailed in Part 4 to the applicable bank account(s) detailed at the beginning of this Subscription form. The Applicant further agrees to provide the Administrator on receipt of a written or email request with either a certified statement or certified deal confirmation within 7 Business Days from the date of the request should this be required to satisfy anti-money laundering requirements. The Applicant consents that redemption payments shall only be credited to the Applicant's relevant bank account(s) as detailed in Part 4 of this Subscription Form.
20. The Applicant hereby indemnifies, and keeps indemnified, each of the Administrator, the Manager, the ICAV and its Directors and agrees to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any of them acting upon instructions given by facsimile, email (including by email attachment) or via any electronic distribution platform acceptable to the aforementioned parties at their absolute discretion. In the circumstances where instructions relate to a change to bank account details for redemption payments, the Applicant acknowledges that written instruction, signed by two Authorised Signatories (where applicable), together with a certified copy of a recent bank statement(s) for the revised bank account(s) will be required to effect such a change and that if additional information is requested this will be provided on request to the Administrator. Where other notified changes are considered in the opinion of the Administrator to be material then further

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verification/evidence may require to be provided. The Applicant consents and warrants that the Administrator, the Manager, the ICAV and its Directors may rely conclusively upon and shall incur no liability in respect of any action taken upon such notice, consent, request, instruction or other instrument believed to be in good faith to be genuine or to be signed or otherwise given by properly authorised persons.

21. The Applicant is not, nor acting on behalf of, a person or entity to whom the offer or sale of shares in the ICAV may not be made. The Applicant further consents and warrants that they are not a U.S. Person (for taxation purposes) nor acquiring Shares on behalf of, or for the benefit of a U.S. Person, nor intending to transfer any Shares that may be purchased by the Applicant to any person who is a U.S. Person. The Applicant represents that neither the Applicant nor anyone on the Applicant's behalf has been solicited to purchase Shares while present in the United States, its territories or possessions nor have the funds being utilised for such purchase been obtained from a U.S. Person.
22. The Applicant confirms that the Administrator, the Manager, the ICAV and its Directors shall be held harmless and indemnified against any loss arising as a result of their being unable to process the application if such information as requested by any of the parties referred to has not been provided.
23. The Applicant hereby indemnifies, and keeps indemnified, the Administrator, the Manager, the ICAV and its Directors against any and all claims, actions, liabilities, costs, or expenses of any kind arising or resulting from the holding or acquisition of Shares by a person other than a qualified holder under the Instrument of Incorporation.
24. The Applicant hereby indemnifies, and keeps indemnified, the Administrator, the Manager, the ICAV and its Directors against any and all any tax the ICAV is required to account for on the Applicant's behalf, including any penalties and interest thereon.
25. The Applicant confirms that any complaint(s) regarding investment in the ICAV will be forwarded in the first instance in writing to the Manager at the following address: Carne Fund Managers (Ireland) Limited, Carne Oversight Team, 2nd Floor, Block E, Iveagh Court, Harcourt Road, Dublin, D02 YT22, Ireland. If the Manager is unable to resolve the complaint, even after consultation with the ICAV and its Directors, then the Applicant may, if eligible, appeal in writing to the Irish Financial Services Ombudsman at the following address:

Financial Services and Pensions Ombudsman
3rd Floor
Lincoln House
Lincoln Place
Dublin 2, D02 VH29
Ireland

26. The Applicant hereby indemnifies, and keeps indemnified, the Administrator, the Manager, the ICAV and its Directors against any and all claims, actions, liabilities, costs, or expenses of any kind arising or resulting from any misrepresentation or any breach of acknowledgement, representation, warranty, confirmation, undertaking or indemnity contained in this Subscription Form or from the failure of the Applicant to disclose any relevant details or provide the Administrator, the Manager or the ICAV and its Directors with all information requested by any of them.

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27. The Applicant hereby acknowledges that its personal information will be handled by the Administrator (as data processor on behalf of the ICAV as data controller) in accordance with the Irish Data Protection Acts 1988 to 2018 and the General Data Protection Regulation (Regulation 2016/679), as amended from time to time. The Applicant also acknowledges that this information will be processed by the Administrator for the purposes of carrying out the services of administrator, registrar and transfer agent of the ICAV and to comply with legal obligations including legal obligations under company law and anti-money laundering legislation. The Applicant acknowledges that the Administrator will disclose my/our information to third parties (including to the Manager and/or the Investment Manager or their affiliates, agents or duly appointed service providers) where necessary or for legitimate business interests. This may include disclosure to third parties such as the Auditors, the Irish Revenue authorities pursuant to the Common Reporting Standard and the Central Bank or agents of the Administrator who process the data for anti-money laundering purposes or for compliance with foreign regulatory requirements. The Applicant hereby consents to the processing of my/our information, which may include (1) the recording of telephone calls with the Administrator for the purpose of confirming data, (2) the disclosure of my/our information as outlined above to the Manager or the Investment Manager and their agents or duly appointed service providers, (3) the disclosure of my/our information where necessary, or in the ICAV's or the Administrator's legitimate interests, to any company in the Administrator's and/or the Manager's and/or the Investment Manager's group of companies, or (4) the disclosure of my/our information to agents of the Administrator, including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in Ireland or (5) making information available, to the extent required by applicable laws or regulations, to the local taxation authority in the Cayman Islands, British Virgin Islands or other fund Jurisdiction and the Internal Revenue Service, HMRC or foreign fiscal authority or other governmental agency in relation to FATCA and/or the Common Reporting Standard.
28. The Applicant acknowledges that the ICAV, the Directors and the Administrator are each authorised and instructed to accept and execute any instructions related to this Subscription Form, the purchase or redemption of Shares or the maintenance of the Applicant's account by facsimile. If instructions are given by facsimile, the Applicant acknowledges that it has the burden to ensure that its instructions are received in legible form and agrees to confirm the instructions in writing. The Applicant agrees to indemnify the ICAV, the Directors and the Administrator and agrees to keep each of them indemnified, against any loss of any nature whatsoever arising to each of them as a result of any of them acting on the Applicant's facsimile instructions. The Applicant acknowledges that the ICAV, the Manager and the Administrator shall not incur any liability in respect of any action taken upon any information provided to the ICAV by the Applicant or for relying on any notice, consent, request, instructions or other instrument believed to be genuine or to be signed by properly authorized persons on behalf of Investor, including any document transmitted by facsimile or email.
29. By executing this document, the Applicant is consenting to electronic delivery and giving permission for the ICAV and its Service Providers and other representatives, to deliver via email any documentation, reports and other information to be delivered to the Applicant in connection with the Applicant's investment in the Fund. Such information may include confidential information regarding the ICAV, including but not limited to, the Applicant and investment information. Certain information, at the discretion of the ICAV, may be delivered to the Applicant by regular mail, facsimile or courier. The Applicant also consents to the ICAV transmitting information by email to any of the Applicant's or the Service Providers advisors, accountants or others to whom the Applicant has requested that such information be provided. The Applicant understands that contact via non-encrypted email, such as that expected to be used by the ICAV, and the transmission

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of email data take place over public networks and therefore will be unprotected. Although the ICAV and its Service Providers will take reasonable precautions regarding the integrity, confidentiality and security of information sent by email, none of the ICAV, its affiliates or any of its service providers or other representatives will be liable for interception, system failure or other problems that may result in incomplete or incorrect transmission. In addition, information transmitted by email may need to be disclosed to third parties, including regulatory authorities with jurisdiction over the ICAV or its Service Providers, and could be accessed by unauthorized persons. The Applicant agrees to release the ICAV, its affiliates and its service providers from any form of liability or loss associated with the communication of Fund information by email, including but not limited to, the Applicant and investment information. The ICAV and its Service Providers make no warranties in relation to these matters and the Applicant accepts the risks associated with the use of email. The ICAV and its Service Providers also reserve the right to intercept, monitor and retain communications to and from their systems as permitted by applicable law. The Applicant understands that to receive information by email, the Applicant will need internet access, a valid email address and the ability to install or download such applications as the ICAV may specify. If the Applicant wishes to retain information sent by email, the Applicant will need access to a printer or other device to download and print or save such information. The Applicant also understands that it is the Applicant's obligation to inform the ICAV and the Administrator in the event that any of the Applicant's or the Applicant's service providers' email addresses change. The Applicant may update any of the Applicant's or the Applicant's service providers' email addresses by contacting an appropriate representative of the ICAV and requesting an update. This consent will be effective immediately and will remain in effect unless and until the Applicant revokes it. At any time, the Applicant may revoke this consent and/or request paper copies of any documents, at no additional cost to the Applicant, by sending a written revocation and/or request to the attention of investor services team at the Administrator to the address to the address provided above. The Applicant acknowledges that it may take up to three (3) days to process a revocation of consent to electronic delivery (or request for paper copies) from the date that the Applicant's revocation or request is received by the ICAV.

30. The Applicant hereby acknowledges that any wire transfers of the proceeds of any distributions or redemptions sent to the financial institution indicated by the Applicant will constitute payment to the Applicant and will relieve the ICAV of any further obligation with respect to the amounts so paid and the Shares thereby redeemed. The Applicant releases the ICAV from any further obligation with respect thereto.
31. The Applicant consents to the Administrator sharing confidential information obtained from the Applicant (including any and all personal information that could be used to identify an investor) with Administrator's affiliates. The information only will be used in carrying out the responsibilities of the Administrator and is subject to the confidentiality provisions in the Administration Agreement.
32. The Applicant acknowledges that any and all instructions related to purchases or redemptions of Shares or any other instruction effecting the registration of or interest in any Shares must be in the English language and that any instruction not in the English language shall not be acted upon.
33. The Applicant acknowledges that the Administrator does not exercise any discretion with respect to management or disposition of the assets and liabilities of the Fund and specifically is entitled to rely on and is not responsible for the valuation information provided by the ICAV, the Manager, any investment manager, advisor, or agent of the ICAV, any brokers, custodians or other financial intermediaries and any third party pricing services.

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34. The Applicant agrees to comply with all tax, anti-money laundering and exchange control reporting requirements imposed on the Applicant by any applicable jurisdiction in connection with this Subscription Form. The Applicant acknowledges that if the ICAV or Administrator has a suspicion that a payment to the Fund (by way of subscription or otherwise) contains the proceeds of criminal conduct, the ICAV or Administrator will be required to report such suspicion to the appropriate governmental authorities pursuant to applicable law. Any such report and the disclosures therein shall not be treated as a breach of any confidentiality restriction.
35. The Applicant hereby acknowledges that the Administrator is involved in various aspects of the ICAV's operations and agrees that Administrator shall specifically be entitled to rely on this Subscription Form and all representations of the Applicant herein as a third party beneficiary to the fullest extent permitted by applicable law.
36. Where applicable, for joint applicants /the Applicants each individually authorizes the ICAV, the Administrator and each of their delegates to act upon the written instructions of any one of the Applicants in respect of the transfer or redemption of any of the Shares registered in the joint names.
37. In respect of joint applicants only, we direct that on the death of one of us the Share(s) 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.

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Schedule B: 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 investor'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 Irish Data Protection Acts 1988 to 2018 and the General Data Protection Regulation (Regulation 2016/679), as amended from time to time. 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 Revenue, the Irish tax authority. They may in turn exchange this information with foreign tax authorities, including tax authorities outside the EU.

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

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

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

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

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

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

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

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

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

(Mandatory fields are marked with an *)

***Section 1: Account Holder Identification**

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

Country of Incorporation or Organisation: _____

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

Number: _____ Street: _____

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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:

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

***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 (TIN). For further guidance please refer to the OECD CRS Information Portal (<http://www.oecd.org/tax/automatic-exchange/>).

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

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

OR

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

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

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

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

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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 Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For Joint or multiple Controlling Persons please use a separate Self-Certification 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	☐	

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Controlling Person of a legal arrangement (non-trust) – other-equivalent	☐	
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Section 5: Declaration and Undertakings

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

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

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

Data Protection - Customer Information Notice:

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

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

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

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

Further information is available on the OECD website: <http://oecd.org/tax/automatic-exchange/> and on the Irish Revenue website <http://www.revenue.ie/en/business/aeoi/>

*Authorised Signature:

*Print Name:

*Date: (dd/mm/yyyy):

*Capacity (if Controlling Person):

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Schedule C: 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 Irish Data Protection Acts 1988 to 2018 and the General Data Protection Regulation (Regulation 2016/679), as amended from time to time. 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 relevant tax authorities. They in turn may exchange this information, and other financial information with foreign tax authorities, including tax authorities located outside the EU.

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

For further information on FATCA or CRS please refer to the below websites at:

<http://www.tia.gov.ky/>

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

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

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

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

(Mandatory fields are marked with an *)

***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: _____

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***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 **US 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.

- | | | |
|-------|--|--------------------------|
| II. | <i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i> | ☐ |
| III. | <i>Registered Deemed Compliant Foreign Financial Institution</i> | ☐ |
| IIII. | <i>Participating Foreign Financial Institution</i> | ☐ |

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

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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 *GIIIN* but is sponsored by another entity which does have a *GIIIN*. Please provide the sponsor's name and sponsor's *GIIIN*: ☐

Sponsor's Name: _____

Sponsor's *GIIN*:

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NOTE: This option is only available to sponsored Investment Entities in Mode 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;

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

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

Indicate exemption:

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

- 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:

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

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

I. **Active Non-Financial Foreign Entity (NFFE)** ☐

II. **Passive Non-Financial Foreign Entity (NFFE)** ☐
(Please tick the box that applies)

I. **Passive Non-Financial Foreign Entity with no Controlling Persons that are specified U.S Persons.**

II. **Passive Non-Foreign Financial Entity with Controlling Persons that are specified U.S Persons.** (If this box is ticked, please indicate the name of all natural Controlling Person(s) of the Entity in section 6.1 below and separately complete and include self-certification forms for each of your Controlling Persons)

III. **Excepted Non-Financial Foreign Entity (NFFE)** ☐

IV. **Direct Reporting Non-Financial Foreign Entity (NFFE)** ☐
Please provide your GIIN

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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.

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

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

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

Or

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

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

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

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

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

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

5.1 Financial Institutions under CRS:

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

Note: Please check the relevant tax authority 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 the applicable jurisdiction.

i. **Reporting Financial Institution resident in a participating CRS jurisdiction** ☐

ii. **Financial Institution Resident in a Non-Participating Jurisdiction**
(Please also tick the box that applies)

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 form for each of your Controlling Persons) ☐

An **Investment Entity** resident in a **Non-Participating Jurisdiction** that is not managed by another Financial Institution ☐

iii. **Non-Reporting Financial Institution under CRS.**
Specify the type of Non-Reporting Financial Institution below: ☐

- Governmental Entity ☐
- International Organisation ☐
- Central Bank ☐
- Broad Participation Retirement Fund ☐
- Narrow Participation Retirement Fund ☐
- Pension Fund of a Governmental Entity, International Organisation, or Central Bank Exempt Collective Investment Vehicle ☐
- Trust whose trustee reports all required information with respect to all CRS Reportable Accounts ☐
- Qualified Credit Card Issuer ☐
- Other Entity defined under domestic law as low risk of being used to evade tax ☐

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5.2 Non-Financial Institution (Non-Financial Foreign Entity/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 or Passive NFE.

- i. **Active Non-Financial Entity (NFE)** – a corporation the stock of which is regularly traded on an established securities market. ☐
Please provide the name of the established securities market on which the corporation is regularly traded:

- ii. **Active Non-Financial Entity (NFE)** – if you are a Related Entity of a regularly traded corporation. ☐
Please provide the name of the regularly traded corporation that the Entity is a Related Entity of:

Please provide details of the securities market that the entity is listed on:

- iii. **Active Non-Financial Entity (NFE)** – a Government Entity or Central Bank ☐
iv. **Active Non-Financial Entity (NFE)** – an International Organisation ☐
v. **Active Non-Financial Entity (NFE)** – *other* than those listed in I, II, III or IV above. (for example, a start-up NFE or a non-profit NFE) ☐
vi. **Passive Non-Financial Entity (NFE)**- (if this box is ticked, please also complete Section 6.1 below and indicate the name of all-natural Controlling Person(s) of the Entity and complete a separate Individual Self-Certification Form for each of your Controlling Person(s) ☐

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Section 6: Controlling Persons

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

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

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

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

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

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

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

I.	
II.	
III.	

Note: In case of a Trust, Controlling Persons means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary (ies) or class(es) of beneficiary(ies), **AND** any other natural person(s) exercising ultimate effective control over the trust. With respect to an Entity that is a legal person, if there are no natural person(s) who exercise control over the Entity, then the Controlling Person will be the natural person who holds the position of senior managing official of the Entity. The threshold in respect of a legal person is direct or indirect ownership or control of 10% or more of the shares or voting rights in the legal person.

6.2 Complete a separate Individual (Controlling Person's) Self-Certification for FATCA and CRS for each Controlling Person listed in Section 6.1.

Section 7: Declarations and Undertakings

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

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

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

**Signature of First Applicant /
Authorised Signatory / Intermediary:**

**Signature of Second Applicant /
Authorised Signatory / Intermediary:**

Name (Please Print):

Name (Please Print):

**Capacity of Authorised Signatory
(if applicable):**

**Capacity of Authorised Signatory (if
applicable):**

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

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

Appendix 1: Anti-Money Laundering Declaration & Documentation Requirements

INDIVIDUAL/JOINT ACCOUNT (NATURAL PERSON)

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declarations.
2. Authorised Signatory List, if applicable (certified copy).
3. One Personal Identity document (certified copy)
4. One proof of residential address (certified copy)
5. Source of Wealth Declaration Form and the supporting documentation for the Source of Wealth (certified copy)
6. The individual's profession.
7. FATCA Documentation (if applicable) (copy).
8. AEOI Documentation (if applicable) (copy).

DESIGNATED PERSON – REGULATED ENTITY IN LOW RISK COUNTRY

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declarations.
2. Confirmation of Name & Address (copy).
3. Confirmation of Regulatory Authorisation (copy).
4. Letter of Assurance or a Letter of Comfort (If acting as an intermediary) (copy).
5. Wolfsberg Questionnaire (copy).
6. Authorised Signatory List (copy).
7. **Beneficial Ownership Identification Form (copy).**

To note, the Beneficial Ownership Form is not required, if the Designated Person is located in a Risk Level 1 Country and listed on a recognised Stock Exchange.

A list of all shareholders holding 25% or more of the issued share capital of the company.

8. FATCA Documentation (If applicable) (copy).
9. AEOI Documentation (If applicable) (cop).

NOMINEE COMPANY WITH DESIGNATED PERSON PARENT/INTERMEDIARY

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KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Confirmation of Registered Name & Address (copy, if available on-line from the official National Company Registry web-site)
3. Memorandum & Articles of Association (copy).
4. Certificate of Incorporation or equivalent (copy).
5. Letter of Assurance from the Parent Company (copy).
6. Wolfsberg Questionnaire from the parent Company (copy).
7. List of Directors (copy).
8. Authorised Signatory List (copy).
9. AML Due Diligence and Sanctions Questionnaire.
10. Beneficial Ownership Identification Form (copy).
11. FATCA Documentation (if applicable) (copy).
12. AEOI Documentation (if applicable) (copy).

NON REGULATED ENTITY IN A LOW RISK COUNTRY

(RISK LEVEL 1 COUNTRY)

REGULATED / NON REGULATED ENTITY IN A MEDIUM RISK COUNTRY

(RISK LEVEL 2 COUNTRY)

REGULATED / NON REGULATED ENTITY IN A HIGH RISK COUNTRY

(RISK LEVEL 3/RISK LEVEL 4 COUNTRIES)

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declarations.
2. Confirmation of Registered Name & Address (copy, if available on-line from the official National Company Registry web-site).
3. Certificate of Incorporation or Certificate to Trade (certified copy).
4. Memorandum and Articles of Association (certified copy).
5. Authorised Signatory List (certified copy).
6. List of Directors' full names, occupations, residential and business addresses and dates of birth (certified copy).

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7. Personal Identity document and an Address Verification document of at least two directors (certified copy of the Personal Identity document).
8. Personal Identity document and an Address Verification document of two authorised signatories (certified copy of the Personal Identity document).
9. ***Beneficial Ownership Identification Form (copy), if applicable.***

A list of all shareholders holding 25% or more of the issued share capital of the company.

25% ownership is required if the fund is domiciled in Ireland).

(10% ownership is required if the fund is domiciled in Cayman Islands or BVI).

Requirement when the shareholder is a company:

1. Certified copy of the Certificate of Incorporation.

Requirement for individual shareholders (Ultimate Beneficial Owner):

1. Certified copy of a personal identification document.
2. Certified copy of proof of residential address.

10. The latest Annual Report (Copy).
11. FATCA Documentation (if applicable) (copy).
12. AEOI Documentation (if applicable) (copy).

TRUSTS

KYC REQUIREMENTS

The Trust

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Confirmation of Name & Address (copy).
3. Trust Deed (certified copy).
4. List of Trustees' (certified copy).
5. Authorised Signatory List (copy or certified copy) (ensure the Authorised Signatory List represents the entity/individuals that are Authorised to sign on behalf of the account).

The Settlor

Identify and verify each Settlor

For an entity:

Certificate of Incorporation (single copy).

Share Register (single copy).

For an individual

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Certified copy of identification document.

1 proof of address.

The Trustee

1. Confirmation of Name & Address (obtained online).
2. Proof of regulation for the Trustee (obtained online).
3. If the Trustee is not List on Recognised Stock Exchange – the Beneficial Ownership structure must be provided.
4. Authorised Signatory List.
5. If the Trustee is an individual:
Certified copy of identification document.
1 proof of address.

The Protector (if, applicable)

1. Confirmation of Name & Address (obtained online).
2. Proof of regulation for the Protector (obtained online).
3. If the Protector is not List on Recognised Stock Exchange – the Beneficial Ownership structure must be provided.
4. Authorised Signatory List, if applicable (if the Protector has signing Authority on the account).
5. If the Protector is an individual:
Certified copy of identification document.
1 proof of address.

Ultimate Beneficial Owners

Every Beneficial Owner of the Trust must be identified and verified.

For an entity:

Certificate of Incorporation (single copy).

Share Register (single copy).

For an individual

Certified copy of identification document.

1 proof of address.

1. FATCA documentation (if applicable) (copy).

2. AEOI documentation (if applicable) (copy).

Authorised Signatory List – Authority to transact on the account.

Valid ID documents must be provided for two Authorised Signatories with Signing Authority on the account.

PARTNERSHIPS

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.

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2. Confirmation of Name & Address (copy).
 3. Proof of Registration or equivalent (certified copy) or obtained online.
 4. Partnership Agreement (certified copy).
 5. Authorised Signatory List.
(Copy for Risk Level 1 Country).
(Certified copy for Risk Level 2/Risk Level 3/Risk Level 4 Country).
 6. List of Partners' to include full names, occupations, residential and business addresses, and dates of birth (certified copy).
 7. Personal Identity document and an Address Verification document of at least two partners.
The General Partner must be identified (certified copy).
 8. Personal Identity document and an Address Verification document of two authorised signatories (certified copy).
 9. **Beneficial Ownership Identification Form (copy).**
A list of all shareholders holding 25% or more of the issued share capital of the company.
(25% ownership is required if the fund is domiciled in Ireland).
(10% ownership is required if the fund is domiciled in Cayman Islands and BVI).
- Requirement when the shareholder is a company:***
1. Certified copy of the Certificate of Incorporation.
- Requirement for individual shareholders (Ultimate Beneficial Owner):***
1. Certified copy of a personal identification document.
 2. Certified copy of proof of residential address.
10. FATCA Documentation (if applicable) (copy).
 11. AEOI Documentation (if applicable) (copy).

PENSIONS

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Authorised Signatory List
(Copy for Risk Level 1 Country)
(Certified Copy for Risk level 2 / 3 / 4 Countries).
3. Constitutional Documents / Pension rules / Pension plan
(Copy for Risk Level 1 Country or obtained online; and
a Certified Copy for Risk Level 2/Risk Level 3 and Risk Level 4 Countries).
4. Certificate of Incorporation of Pension Manager - only if non-regulated OR not covered by an AML Parent Letter (copy), if applicable.
5. Proof of regulation of Pension Manager (copy) or obtained online.

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6. List of Directors for the Pension Company
(Copy for Risk Level 1 Country; and
a Certified Copy for Risk Level 2/Risk Level 3 and Risk Level 4 Countries).
7. Valid ID Documents for two Directors (certified copy).
Required for Risk Level 2/Risk Level 3 and Risk Level 4 Countries.

Not required for a Risk Level 1 Country.
8. Valid ID Documents for two Authorised Signatories (certified copy).
9. **Beneficial Ownership Identification Form (copy), if applicable.**
A list of all shareholders holding 25% or more of the issued share capital of the company.
(25% ownership is required if the fund is domiciled in Ireland).
(10% ownership is required if the fund is domiciled in Cayman Islands and BVI).

Requirement when the shareholder is a company:
 1. Certified copy of the Certificate of Incorporation.
Requirement for individual shareholders (Ultimate Beneficial Owner):
 1. Certified copy of a personal identification document.
 2. Certified copy of proof of residential address.
10. An AML Letter of Assurance signed by the authorised signatories of the entity responsible for the AML / KYC supervision (simple copy).
11. The latest Annual Report.
(Copy for Risk Level 1 Country)
(Certified copy required for Unaudited Annual Report and for Risk level 2 / 3 / 4 Countries).
12. FATCA Documentation (if applicable) (copy).
- 13.
14. AEOI Documentation (if applicable) (copy).

CHARITIES

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Confirmation of Name & Address (copy or electronic copy if available on-line from the official National Company Registry or Revenue web-site).
3. Confirmation of Charity Registration (certified copy or electronic copy if available on-line from the official competent authority web-site).
4. Proof of regulation (Supervision Authority / Charity regulator) OR publication from an official authority in an equivalent country or obtained online
5. Memorandum & Articles of Association (certified copy).

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6. Certificate of incorporation or equivalent (certified copy) or obtained online.
7. Authorised Signatory List (certified copy).
8. A valid ID Document for two Authorised signatories (certified copy of the ID Document).
9. List of Directors.
(Certified copy Risk Level 2/Risk Level 3/Risk Level 4 Countries)
(Copy for Risk Level 1 Country).
10. A valid ID Document and one proof of address for two Directors (certified copy of the ID Document).
11. **Beneficial Ownership Identification Form (copy)**
A list of all shareholders holding 25% or more of the issued share capital of the company.
(25% ownership is required if the fund is domiciled in Ireland).
(10% ownership is required if the fund is domiciled in Cayman Islands and BVI).

Requirement when the shareholder is a company:
 1. Certified copy of the Certificate of Incorporation.
Requirement for individual shareholders (Ultimate Beneficial Owner):
 2. Certified copy of a personal identification document.
 3. Certified copy of proof of residential address
12. Company's latest Audited Annual Report

(Copy for Risk Level 1 Country and for an Audited Annual Report or available on line)
(Certified copy for Unaudited Annual Report or for a Risk Level 2/Risk Level 3/Risk Level 4 Country).
13. FATCA Documentation (if applicable) (copy).
14. AEOI Documentation (if applicable) (copy).

FUND – REGULATED

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declarations.
2. Confirmation of Registered Name & Address (copy).
3. Confirmation of Regulation (copy).
4. Fund Prospectus

(Copy for Risk Level 1 Country).
(Certified copy for Risk Level 2/Risk Level 3/Risk Level 4 Countries).
5. Authorised Signatory List

(Copy for Risk Level 1 Country).

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(Certified copy for Risk Level 2/Risk Level 3/Risk Level 4 Countries).

6. Valid ID Documents and one proof of address for two Authorised Signatories – for Risk Level 2/Risk Level 3/Risk Level 4 Countries (certified copy)
Not required for Risk Level 1 Country.
7. List of Directors
(Certified copy Risk Level 2/Risk Level 3/Risk Level 4 Countries).
(Copy for Risk Level 1 Country).
8. Valid ID Documents and one proof of address for two Directors – for Risk Level 2/Risk Level 3/Risk Level 4 Countries (certified copy).
Not required for Risk Level 1 Country.
9. An AML Letter of Assurance from the entity responsible for the KYC of the fund or from the MLRO of the Fund (copy).
10. List of Authorised Signatories of the entity responsible for the KYC Supervision of the Fund, if applicable (copy).
11. Latest Financial Statements, if applicable.
(Copy for Risk Level 1).
(Certified Copy for Risk Level 2/Risk Level 3/Risk Level 4).
12. **Beneficial Ownership Identification Form (copy)**

A list of all shareholders holding 25% or more of the issued share capital of the company. 25% ownership is required if the fund is domiciled in Ireland).
(10% ownership is required if the fund is domiciled in Cayman or Bermuda).

Requirement when the shareholder is a company:

1. Certified copy of the Certificate of Incorporation.

Requirement for individual shareholders (Ultimate Beneficial Owner):

2. Certified copy of a personal identification document.
3. Certified copy of proof of residential address.
- 4.

The requirements for individuals as in point 1 and 2 above: applies to Risk Level 2/Risk Level 3 and Risk Level 4 Countries.

For Risk Level 1 Countries, we do not require a personal identification document and a proof of address for individual ultimate beneficial owners.

13. FATCA Documentation (If applicable) (copy).

15. AEOI Documentation (If applicable) (copy).

FOUNDATION

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Confirmation of Name & Address (copy or electronic copy if available on-line from the official National Company Registry or Revenue web-site).

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3. Constitutional Foundation Charter/Document for the Foundation.

(Copy for Risk Level 1 Country; or
a Certified Copy for Risk Level 2/Risk Level 3 and Risk Level 4 Countries).
4. Authorised Signatory List

(Copy for Risk Level 1 Country; and
Certified copy for Risk level 2 / 3 / 4 Countries).
5. A valid ID Document and one proof of address for two Authorised signatories

(Certified copy of the ID Document).
6. List of Directors

(Copy for Risk Level 1 Country; and
Certified copy for Risk level 2 / 3 / 4 Countries).
7. A valid ID Document and one proof of address for two Directors (certified copy of the ID Document).
8. **Beneficial Ownership Identification Form (copy)**

A list of all shareholders holding 25% or more of the issued share capital of the company.
(25% ownership is required if the fund is domiciled in Ireland).
(10% ownership is required if the fund is domiciled in Cayman Islands and BVI).

Requirement when the shareholder is a company:
 1. Certified copy of the Certificate of Incorporation.
Requirement for individual shareholders (Ultimate Beneficial Owner):
 1. Certified copy of a personal identification document.
 2. Certified copy of proof of residential address
9. The latest Annual Report.

(Copy for Risk Level 1 Country).
(Certified copy required for Unaudited Annual Report and for Risk level 2 / 3 / 4 Countries).
10. FATCA Documentation if applicable, (copy).
11. AEOI Documentation if applicable, (copy).

STATE OWNED ENTITIES

KYC REQUIREMENTS

1. Fund Application Form including Bank Details and Tax Revenue Declaration.
2. Governmental Decree / Articles of Incorporation / Memorandum or equivalent (confirming the company is a state owned company).

(Copy for Risk Level 1 Country or obtain online; and
Certified copy for Risk level 2 / 3 / 4 Countries or obtain online).
3. List of Authorised Signatories.

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(Copy for Risk Level 1 Country; and
Certified copy for Risk level 2 / 3 / 4 Countries).

4. Valid ID Document and one proof of address for two Authorised signatories (certified copy of the ID Document).

For Risk Level 2/Risk Level 3 and Risk Level 4 Countries.
Not required for Risk Level 1 Country.

5. List of Directors.

(Copy for Risk Level 1 Country; and
Certified copy for Risk level 2 / 3 / 4 Countries).

6. A valid ID Document and one proof of address for two Directors (certified copy of the ID Document).

7. The latest Annual Report.

(Copy for Risk Level 1 Country).

(Certified copy required for Unaudited Annual Report and for Risk level 2 / 3 / 4 Countries).

8. FATCA Documentation, (If applicable), (copy).

9. AEOI Documentation. (If applicable), (copy).

For High Risk investors, CACEIS reserves the right to request further AML Due Diligence documentation as CACEIS deems necessary. This additional AML Due Diligence documentation may be required in original or certified wet-ink format.

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Part 1 - Ultimate Beneficial Ownership Declaration Form

Please provide this form to the Administrator declaring the information regarding the Beneficial Owners (as defined below) and Principals (Directors/Officers) for the company.

“Beneficial Owners” means:

- **For Financial Institutions acting in the capacity as Intermediary**

For all beneficial owners that owns 25% or more of the underlying investor

For all beneficial owners that owns 10% or more of the underlying investor for Cayman Islands or British Virgin Islands domiciled funds.

If applicable, please complete the section below

- **For Entities acting in the capacity as a Nominee**

For all beneficial owners that represents 25% or more of the investment for Irish domiciled funds or

For all beneficial owners that represents 10% or more of the investment for Cayman Islands or British Virgin Islands domiciled funds.

If applicable, please complete the section below

- **For Corporations:**

All principals, officers, directors, and any individuals or entities who own 25% or more for Irish domiciled funds and 10% or more for Cayman Islands/British Virgin Islands domiciled funds. If applicable, please complete the section below.

- **For Not for Profit Entity (Foundation, Association, Charity)**

All individuals with significant responsibility to control, manage, or direct the Not for Profit Entity. If applicable, please complete the section below.

- **Partnerships**

Individuals who own/control 25% or more for Irish domiciled funds and 10% or more for Cayman Islands/British Virgin Island domiciled funds of the assets/voting power, including, but not limited to, Limited Partners. If applicable, please complete the section below.

- **LLCs**

All managing member(s) and any member(s) who owns/controls 25% or more for Irish domiciled funds and 10% or more for Cayman Islands/British Virgin Island domiciled funds. If applicable, please complete the section below.

- **Trusts**

All Settlor(s) / Grantor(s) / Trustee(s) / Protector(s), and all Beneficiaries of the Trust must be declared (regardless of the percentage amount of ownership for the beneficiaries).

If applicable, please complete the section below.

- **Pensions**

For all beneficial owners that represents 25% or more of the investment for Irish domiciled funds or

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For all beneficial owners that represents 10% or more of the investment for Cayman Islands or British Virgin Islands domiciled funds.

If applicable, please complete the section below.

- **Funds**

For all beneficial owners that represents 25% or more of the investment for Irish domiciled funds or

For all beneficial owners that represents 10% or more of the investment for Cayman Islands or British Virgin Islands domiciled funds.

If applicable, please complete the section below.

Details on the investor

Name of the Fund Invested: _____

Register Investor Name: _____

Register Investor Address: _____

Register Investor Country of Incorporation: _____

Details on the Ownership Structure

The following information for each individual, if any, who, directly or indirectly, through any contract, arrangement, understanding, relationship or otherwise, owns 25% or more for Irish domiciled Funds or 10% or more for Cayman Islands/British Virgin Islands domiciled Funds of the subscription monies i.e. the Beneficial Owner¹:

Gender M/F	First Name	Name ²	Date of Birth	City of Birth	Country of Birth	Citizenship(s)	Country of tax residence	% of shares / voting rights (if applicable) ³	Job Title (if applicable)	TIN number ⁴

¹

²

³

⁴

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Details on the Controlling Persons / Legal Representatives

The following information is for individuals with significant responsibility for managing the legal entity listed above (registered investor), such as:

Gender M/F	First Name	Name	Date of Birth	City of Birth	Country of Birth	Citizenship(s)	Country of tax residence	Job Title (if applicable)

☐ An executive officer or senior manager (e.g., Chief Executive Officer, Chief Financial Officer, Chief Operating Officer, Managing Member, General Partner, President, Vice President, Treasurer); or

☐ Any other individual who regularly performs similar functions (If appropriate, an individual listed under section (1) above may also be listed in this section (2).

☐ Individuals with significant responsibility to control, manage, or direct the Not for Profit Entity

☐ Trustee(s)/Grantor(s)/Settlor(s)/Protector(s) for a Trust

☐ **There are no Beneficial Owners.**

No individual(s)/entity/(ies) owns 25% or more of this investment / entity. (10% or more for Cayman Islands/ British Virgin Islands funds). The beneficial owner(s) is (are) individuals who hold the position of legal representative(s).

☐ **There are no legal representatives.**

No natural person(s) falls within the definition of beneficial owner.

By signing below, I declare that the above information is accurate and that I will keep the Administrator informed of any changes or additions to the information provided.

Signature of the Legal Representative of the Investor	Date

**** Please note that the declaration form must be completed on company letter headed paper.**

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

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Part 2 - AML Letter of Assurance

{letterhead of the Administrator}

{Date}

Caceis Ireland Limited

Money Laundering Reporting Officer
CACEIS Ireland limited
Bloodstone Building
Sir John Rogerson's Quay
Dublin
D02 KF24
IRELAND

Dear Sirs,

RE: **[Insert name of the fund]] (the "Fund")**

[Name of the regulated investor/intermediary] with an address of [address] is regulated by the [name of the regulator] as an [bank, investment company, etc] with reference number [reference number] and organised under the laws of [country].

In relation to the introduction of investors and any underlying beneficiaries (together "investors") to the above Fund(s), both to date and in the future, we certify the following checks and we acknowledge that **CACEIS Ireland Limited** is relying on us for customer due diligence purposes with regards to the identity of investors introduced by us (except for ongoing monitoring).

1. We perform the identification and verification of identity of all investors and, where applicable, their beneficial owners in line with anti-money laundering legislation and regulations, which is in compliance with the EU Fifth Money Laundering Directive and the Financial Action task Force Recommendations as amended from time to time.
2. We retain documentary evidence of such identity and verification checks made on behalf of the Fund, for at least five years following the date on which the relationship with the investor has ended.
3. The documents used to identify the investors will be provided as soon as practicable to your office upon request.
4. We confirm that we have adopted measures to prevent and detect the commission of money laundering and/or the financing of terrorism and that all employees, directors and other officers of **[name of the regulated investor/intermediary]**, have received the appropriate level of training to enforce these measures.
5. We perform both initial and periodic checks against European Union, United Nations and The Office of Foreign Assets Control ("OFAC") Sanction lists. In the event of a positive match, we are required to report such matters to the

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appropriate authorities. We also have adequate measures in place to identify beneficial owners. We also confirm that we have appropriate procedures in place including secured interface systems to identify any politically exposed persons, their immediate family members and close associates. We confirm that we will comply with the requirements to carry out enhanced due diligence on their ID and also their source of funds, as well as monitoring any suspicious activities.

6. We confirm that we and our investors do not deal with shell banks.
7. We have read, understand and are aware of the terms of the Prospectus(es) of the Funds and we shall observe them, in particular we shall not allow the purchase or holding of units or shares of the Funds by persons not authorised to purchase or hold them under the provisions of the Prospectus(es).
8. We undertake to advise you immediately, should at any time in the future, our license or registration as noted above be revoked or altered.
9. We confirm that we will immediately notify you should our relationship with any of our investors change.

Yours sincerely,

Authorised Signatory
Position Held
Date

Authorised Signatory
Position Held
Date

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Part 3 - Source of Wealth Declaration

[Place on the letterhead entity]

Caceis Ireland Limited
Bloodstone Building
Sir John Rogerson's Quay
Dublin
D02 KF24
Ireland

Re: Investor name and fund invested in

Dear Sir, Madam,

I/We* hereby confirm that investments made into the above-named Fund:

- Are not made on behalf of a third party;
- the funds made available to the above-named Fund are not from criminal origin, of whatsoever nature, and in particular do not constitute the proceeds of money laundering or terrorism;
- originate from the following source:

- ☐ Capital company/business, of ☐ Savings,
- ☐ Inheritance, ☐ Professional salary
- ☐ Other. Please specify (source of wealth definitions as per below):

Current profession/occupation/line of business/Company

If retired, please provide your profession/occupation/Company during your working life:

This includes investments expected/made in the future.

Regular annual income (including professional income and recurrent income from your assets such as rent, interest, dividends)?

Total annual income (EUR):	☐ <100K	☐ 100K – 250K	☐ >250K
Estimated total assets (EUR):	☐ <1M	☐ 1M - 5M	☐ >5M

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Name of the investor/ authorized signatory:

Signature: _____

Date: _____

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Part 4 – Certification Requirements

- Certification must be made by independent 3rd party (self-certification is not acceptable)
- The certifying body must perform the certification in presence of the original documentation and must meet the client personally when certifying the documents
- Certification can only be made by a competent authority:
 - Notary Public
 - Official Government Agency (commune or municipal)
 - Commissioner of Oaths (which register number is available)
 - A director or authorised signatory of a regulated financial institution in an approved jurisdiction
 - Lawyer or solicitor
 - Chartered accountant
- Certification must be dated within 6 months
- Certification wording should state:
 - "Certified True Copy" or similar
 - Signature of Certifier
 - Name, Title, signature, registration number and contact details of the Certifier (i.e. if is a financial institution – name of bank, person, title, phone, etc.)

Appendix 2: Residence Definitions for Tax Purposes

Definitions

“Irish Resident”

- in the case of an individual, means any person resident in Ireland for tax purposes
- In the case of a trust, means a trust that is resident in Ireland for tax purposes
- In the case of a company, means a company that is resident in Ireland for tax purposes.

“Irish Ordinary Residence”

The following are based on definitions which have been issued by the Irish Revenue Commissioners in relation to the residence of individuals and companies.

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

For example, an individual who is resident in the State for the tax years:

- (1) 1 January 2012 to 31 December 2012;
- (2) 1 January 2013 to 31 December 2013; and
- (3) 1 January 2014 to 31 December 2014;

Will become ordinarily resident with effect 1 January 2015.

An individual who has been ordinarily resident in the State ceases to be ordinarily resident at the end of the third consecutive tax year in which s/he is not resident. Thus, an individual who is resident and ordinarily resident in the State in the tax year 1 January 2014 to 31 December 2014 and departs from the State in that year will remain ordinarily resident up to the end of the tax year 2017.

“Ordinarily Resident in Ireland” means any person ordinarily resident in Ireland for tax purposes.

Residence – Company

A company which has its central management and control in Ireland is resident in Ireland irrespective of where it is incorporated. A company which does not have its central management and control in Ireland, but which is incorporated in Ireland is resident in Ireland except where: -

- the company or a related company carries on a trade in Ireland, and either the company is ultimately controlled by persons resident in EU Member States or, resident in countries with which Ireland has a double taxation treaty, or the

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company or a related company are quoted companies on a recognised stock exchange in the EU or in a taxation treaty country;

or

- the company is regarded as not resident in Ireland under a double taxation treaty between Ireland and another country.

A company incorporated in Ireland and which is managed and controlled in an EU or treaty country which does not have a management test for corporate residence and therefore is not resident in that other territory, is resident in Ireland.

It should be noted that the determination of a company's residence for tax purposes can be complex in certain cases and potential investors are referred to the specific legislative provisions that are contained in Section 23A of the Taxes Consolidation Act 1997 ("TCA").

Residence – Individual

The Irish tax year operates on a calendar year basis.

An individual will be regarded as being resident in Ireland for a tax year if that individual:

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

Presence in a twelve-month tax year by an individual of not more than 30 days in Ireland will not be reckoned for the purpose of applying the two-year test. Presence in Ireland for a day means the personal presence of an individual at any point in time during the particular day in question.

Entity Tax Self-Certification

There is an agreement between the Government of Ireland and the Government of the United States of America to improve international tax compliance and to implement the Foreign Account Tax Compliance Act ("FATCA"), which has introduced a reporting regime for financial institutions with respect to certain accounts.

If necessary, the Applicant should complete the "Entity Tax Self-Certification form for FATCA and CRS" attached as **Schedule C**. We recommend that you consult your tax advisor as to whether this form is required.

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Appendix 3: Return of Values (Investment Undertakings) Regulations 2013

NicheJungle 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 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 (a certified copy or copy 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 it's duly appointed delegates as Data Processor for the ICAV in accordance with 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.