

Discretionary Fund Management Application Form

ACCOUNT OPENING & APPLICATION FORM

Please ensure that you have read the Discretionary Fund Management Agreement, Discretionary & Execution Services Terms, Discretionary Fund Management Programmes and Minimum Investment & Fee Schedule before completing this Account Opening & Application Form. Defined terms used in this form are those used in the Definition document. All applicants are required to sign the declaration on page 11. Please complete this form in black ink using BLOCK CAPITAL. All information requested in this Original Account Agreement Form must be completed.

PLEASE RETURN TO

Fondsstad
14 Rue du Rhône | 1204 Genève | Switzerland
T: +41 22 819 1741
F: +41 22 819 1900
Email: admin@fondsstad.ch

1. INVESTOR DETAILS

<i>Title</i>	<i>Full Name of Applicant</i>	<i>Gender</i>	<i>Date of Birth</i>
<i>Entity Name/Type (Financial Company/Bank/Nominee/Joint Holder/Financial Agent/Intermediaries)</i>			
<i>Designation</i>			
<i>Place of Incorporation</i>	<i>Passport/Registration Number</i>	<i>Tax ID (EU Nationals)</i>	
<i>Country of Birth</i>	<i>Nationality</i>		
<i>Registered Address</i>			
<i>Town/City</i>	<i>Postcode</i>	<i>Country of Residence</i>	
<i>Telephone</i>	<i>Fax</i>		
<i>Email 1</i>	<i>Email 2</i>		

Account Type

Financial Institution Individual(s) Partnership Corporation Nominee Trust

Other Accounts

<i>Name (e.g. Clearstream)</i>	<i>Account Number</i>

Correspondence Address

<i>Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>

Joint Holders

<i>Title</i>	<i>Full Name</i>	<i>Gender</i>	<i>Date of Birth</i>
<i>Title</i>	<i>Full Name</i>	<i>Gender</i>	<i>Date of Birth</i>
<i>Title</i>	<i>Full Name</i>	<i>Gender</i>	<i>Date of Birth</i>

Additional Address Details

<i>Title</i>	<i>Name</i>	
<i>Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>
<i>Telephone</i>	<i>Fax</i>	
<i>Email</i>	<i>Agency Code (If known; issued by the Investment Manager)</i>	

Nature of your Entity

- | | |
|---|---|
| <input type="checkbox"/> Government or Local Authority Entity | <input type="checkbox"/> Charity |
| <input type="checkbox"/> Government or Local Authority Pension Fund | <input type="checkbox"/> Non profit organisation |
| <input type="checkbox"/> Sovereign Wealth Fund | <input type="checkbox"/> Insurance Company |
| <input type="checkbox"/> Pension Fund | <input type="checkbox"/> Banking Institution |
| <input type="checkbox"/> Investment Company | <input type="checkbox"/> Collective Investment Scheme |
| <input type="checkbox"/> Broker | <input type="checkbox"/> Other |

2. SUBSCRIPTION

I/we hereby wish to invest in the following Investment Programmes in accordance with the Terms and Conditions and the Discretionary Fund Management Agreement.

DFM Programme	ID	Class	Amount
Defensive	FA0012282500	EUR	
	FA0012282501	CHF	
	FA0012282502	GBP	
	FA0012282503	USD	
Moderate	FA0012282600	EUR	
	FA0012282601	CHF	
	FA0012282602	GBP	
	FA0012282603	USD	
Dynamic	FA0012282800	EUR	
	FA0012282801	CHF	
	FA0012282802	GBP	
	FA0012282803	USD	
Sustainable	FA0012282900	EUR	
	FA0012282901	CHF	
	FA0012282902	GBP	
	FA0012282903	USD	

If you are applying across multiple sub accounts/designations, please complete separate pages of this section for each sub account/designation.

Subscription - Tailor Made Investment Programmes

DFM Programme	ID	Class	Amount

3. PAYMENT INSTRUCTIONS

When instructing a payment, please include the appropriate transaction or account number for the investment. Subscription monies must be settled in accordance with the relevant deadline, regardless of any delay in the issue of a confirmation to you.

Electronic Fund Transfer (ETF)

Currency	EUR	CHF	GBP	USD
Bank Name	ING	ING		
BIC / Swift Code	INGBNL2A	INGBNL2A		
ABA Code				
In Favour of	Stichting Bewaarder Insight Beleggingsfondsen	Stichting Bewaarder Insight Beleggingsfondsen		
Account no	0007 6101 07	0020 1748 37		
IBAN no	NL35 INGB 0007 6101 07	NL28 INGB 0020 1748 37		
Ref: e.g. Programme/Investor Name				

Please note: Any bank charges in respect of electronic transfers or otherwise will be deducted from the amount or value of subscriptions and the net amount invested in Programmes.

Payment by Cheque

Please make cheque payable to: **Stichting Bewaarder Insight Beleggingsfondsen**

If your subscription was placed through an agent or broker, please provide:

Order number:

Date of order:

4. REDEMPTION PAYMENT INSTRUCTIONS

Please accept our written instructions for redemption payment proceeds to be paid directly to our bank account as follows:

Currency EUR CHF GBP USD

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Bank Name

--

Address of Bank

--

Account Name

Account Number

--	--	--

Sort Code

BIC/Swift/ABA Code

IBAN Number

--	--	--

Reference Code/Pay through Bank Details

Please contact your bank if you do not know your SWIFT code.

PLEASE NOTE THAT NO THIRD PARTY PAYMENTS WILL BE UNDERTAKEN

Notes:

- (a) Please note bank charges may be deducted (see Discretionary Fund Management (DFM) Agreement for further details).
- (b) The base currency of the Programme and the designated currency of any Share Class is set out in the DFM and is also noted above. Applications for Programmes shall be accepted in the Base Currency of the Programme or the designated currency of the relevant Share Class. At the discretion of the Manager, applications may be accepted in currencies other than the Base Currency. Any applications made in currencies other than the Base Currency of the Programme or the designated currency of the relevant Share Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be at the cost and risk of the relevant investor.
- (c) Applicants should sign the relevant additional declarations on the following pages of this Account Opening Form. Exempt from tax non-Dutch/UK Residents and Exempt from tax Dutch/UK Residents should also complete the relevant declarations appropriate to them.
- (d) Notwithstanding anything expressed or implied in this Subscription Agreement or any other Programme document to the contrary, each investor and each prospective investor (and each employee, representative, or other agent thereof) may disclose to any and all persons, without limitation of any kind, the tax treatment and any facts that may be relevant to the tax structure of the transactions contemplated hereby; provided, however, that no investor or prospective investor (and no employee, representative, or other agent thereof) shall disclose any other information to the extent that such disclosure could reasonably be expected to result in a violation of any applicable securities law.

5. AGENT DETAILS

To be completed by Financial Agent, Nominees and Intermediaries

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Contact Name

--

Agent name

--

Address

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<i>Telephone Number</i>	<i>Fax Number</i>
<i>VAT Registration Number</i>	
<i>Regulator Name</i>	<i>Regulator Approval Number</i>
<i>Agent Code</i>	
<i>Agent Number</i>	<i>Agent Stamp</i>
<i>Commission Terms Agreed with the Programme Promoter</i>	
<i>Email</i>	

6. REPORTING CURRENCY INSTRUCTIONS

Please select the currency in which you would like to receive the Valuation and Transaction Statement

Currency EUR CHF GBP USD

Note: if no currency is selected, the Programmes' base currency will be used.

7. DECLARATION

1. I/we declare that we have received and read a copy of DFM Agreement in good time prior to making the application for Investment. We are aware that copies of the DFM Agreement and the latest annual reports and other information may be obtained from the Administrator at 12 Wavel mews, London NW6 3AB, UK. We give full consent to receiving this information by means of electronic communication.
2. I/We hereby acknowledge that I/we have received and read a copy of the current DFM Agreement and that this application is made pursuant to the terms of the DFM and subject to the DFM and this Subscription Agreement. I/We acknowledge that the Insight Capital GmbH reserves the right to reject any application in whole or in part.
3. I/We agree that that subscription for DFM will be governed and construed in accordance with the UK law and we confirm that by subscribing for DFM, we are not relying on any information or representation other than such as may be contained in the DFM Agreement, the relevant Programme and the most recent annual report (if available) thereto.
4. I/We confirm that we are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose the entire sum invested.
5. I/We agree to notify the Portfolio Manager or the Administrator immediately if we become aware that any of the representations is no longer accurate and complete in all respects and agree immediately to take such action as the Portfolio Manager may direct, including where appropriate, the redemption of our investment in its entirety. We agree to indemnify each of the Administrator, the Portfolio Manager, the depositor, and the Custodian against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any breach of any of the representations, warranties or declarations given by us in this Subscription Agreement.
6. I/We hereby declare that the investment in the Programme will not be in violation of any applicable laws.
7. I/We have such knowledge and experience in business and financial matters or have obtained advice from a professional adviser such that I/we are capable of evaluating the merits, and the risks, of an investment by us in the Programme. I/We have consulted to the extent I/we deemed appropriate with our own advisors as to the financial, tax, legal and related matters concerning an investment in the Programme and on that basis I/we believe that an investment in the Programme is suitable and appropriate for me/us.

8. I/We acknowledge the right of the Portfolio Manager any time to require the mandatory redemption of Investments in the circumstances provided for in the DFM Agreement.
9. I/We hereby certify that I am/we are not a US Person¹ and that the Investment hereby applied for are not directly or indirectly by or on behalf of, or for the account of, a US Person. I/We further confirm that I/we will notify the Administrator in the event that I/we become a US Person or hold the Investment on behalf of, or for the account or benefit of, a US Person.
10. We are U.S. Taxpayer (as defined below):

Yes No (please tick the appropriate box)

We will hold Investments on behalf of a U.S. Taxpayer (as defined below)

Yes No (please tick the appropriate box)

If “yes” to either above questions, then we understand the U.S. Tax consequences of such investments and agree to provide the Portfolio Manager and the Administrator with such additional tax information as they request from time to time.

An investor may be a “U.S. Taxpayer” but not a “U.S. Person”. For example, an individual who is a U.S. citizen residing outside of the United States is not a “U.S. Person” but is a “U.S. Taxpayer”.

“U.S. Taxpayer” is defined to include (regardless of whether it subject to U.S. taxation) a U.S. citizen or resident alien of the United States (as defined for United States federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organised in, or under the laws of, the United States or any state thereof (including the District of Colombia); any other partnership that is treated as a U.S. Taxpayer under U.S. Treasury Department regulations; any estate, the income of which is subject to U.S. income taxation regardless of source; and any trust (i) over whose administration a court within the United States has primary supervision and all substantial decisions of which are under the control of one or more U.S. fiduciaries or (ii) that has properly elected to be treated as a US person for U.S. federal income tax purposes. Persons who have lost their U.S. citizenship and who live outside the United States may nonetheless, in some circumstances, be treated as U.S. Taxpayers. The U.S. federal income tax treatment of a partner or other beneficial owner in a partnership or other flow-through entity generally will depend on the status of the partner and the activities of such partnership.

11. We are duly organised, validly existing and in good standing under the laws of the jurisdiction in which we are organised, and we have the power and authority to enter into and perform our obligations under this Subscription Agreement.
12. We are able to bear the economic risk of an investment in the Programmes, including, without limitation, the risk of loss of all or a part of our investment. We do not have an overall commitment to investments which are not readily marketable that is disproportionate to our net worth, and our investment in the Programmes will not cause such overall commitment to be excessive.
13. I/We agree not to duplicate or to furnish particulars of the DFM Agreement, or to divulge any of its contents, to any person other than my/our investment, legal or tax advisors (who may use the information contained in the DFM Agreement solely for purposes relating to my/our investment in the Programme).
14. I/We hereby confirm that I/we shall be deemed to make, on a continuing basis, each of the statements contained herein unless I/we notify you to the contrary in relation to any Programmes I/we may hold or obtain at any time.
15. I/We hereby confirm that the Portfolio Manager and the Administrator are each authorised and instructed to accept and execute any instructions in respect of the Programmes to which this application relates given by me/us by facsimile. If instructions are given by me/us by facsimile, I/we undertake to confirm same in writing. I/We hereby agree to indemnify the Portfolio Manager and the Administrator and agree 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 facsimile instructions. The Portfolio Manager and the Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instructions or other instrument believed, in good faith, to be genuine or to be signed by properly authorised persons.
16. I/We consent to details of our Investments being disclosed to any companies within the Investment Manager's group of companies.
17. (Natural persons only) I confirm that I have reached the age of majority under the laws of my country of nationality, residence or domicile, or 18 years, whichever is the greater.
18. (Natural persons only) I hereby confirm that in Investing in the Programme I am acting in the course of a business carried on by me and that the rights and obligations arising from this contract do not pass to another natural person who is acting otherwise than in the course of a business carried on by that natural person.
19. (Corporate applicants only) We hereby confirm that we have the full right and power to make this application and invest in Programmes and all necessary corporate action has been taken to authorise this application and such investment.
20. (Banks and Brokers) We are a bank or broker and are making this application on behalf of clients for investment purposes. We hereby make each of the declarations in Section 7 above and Section 8 below, on behalf of such clients and further covenant that we will notify Insight Capital if we become aware that any such client has become a US Person,

that we will not at any time knowingly transfer or deliver Investments or any interest therein to a US Person and that we will not make any transfer of Investments in the United States.

21. I/We acknowledge that due to anti-money laundering requirements operating within their respective jurisdictions the Administrator and the Manager (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Administrator and the Manager (on its own behalf and as agent of the Manager) shall be held harmless and indemnified against any loss arising as a result of a failure to process the application if such information has been required by the parties referred to and has not been provided by us or has been provided in incomplete form.
22. I/We request that investments pursuant to this application are registered in the name of the Custodian and address set out below.
Stichting Bewaarder Insight Beleggingsfondsen
Herengracht 450
1017 CA
Amsterdam
The Netherlands
23. We consent to personal information obtained in relation to us being handled by the Administrator, the Portfolio Manager, the Custodian or the Investment Manager and their delegates, agents or affiliates in accordance with the UK Data Protection Acts. Information in relation to us will be held, used, disclosed and processed for the purposes of (a) managing and administering our Investments and any related account on an ongoing basis; (b) for any other specific purposes where we have given specific consent to do so; (c) to carry out statistical analysis and market research (d) to comply with any applicable legal or regulatory obligations including legal obligations under company law and anti-money laundering legislation; (e) and for disclosure and transfer whether in the European Economic Area or elsewhere (including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in the European Economic Area) to third parties including our financial adviser (where appropriate), regulatory bodies, auditors, technology providers or to the Programme and its delegates and its or their duly appointed agents and any of their respective related, associated or affiliated companies for the purposes specified above; (e) For other legitimate business interests of the Programme. We hereby acknowledge our right of access to and the right to amend and rectify our personal data, as provided herein. We understand that the Portfolio Manager will hold any personal information provided by us in confidence and in accordance with the EU Data Protection. We consent to the recording of telephone calls that we make to and receive from the Administrator, the Portfolio Manager, the Custodian or the Investment Manager and their delegates or duly appointed agents and any of their respective related, associated or affiliated companies for record keeping, security and/or training purposes. We consent to the Portfolio Manager or the Investment Manager sending information about other investment services to us by letter, telephone or other reasonable means of communication. We understand that we have a right not to receive such information.
24. We agree and acknowledge that, in order to be valid, this Account Opening Form must be signed by each applicant and, if not fully completed to the satisfaction of the Portfolio Manager, the Investment Manager or the Administrator, the application may be rejected.
25. We hereby authorise the Investment Manager and the Administrator to retain all documentation provided by us in relation to our investment in the Programme for such period of time as may be required by UK law, but for not less than five years after the period of investment has ended.
26. We are aware and acknowledge that (i) the Programmes have a limited operating history; (ii) there is no assurance of any income or capital growth from such investment; (iii) in making this investment, we are relying, if at all, solely upon the advice of our own tax advisor with respect to the tax aspects of an Investment in the Programmes; and (v) any disposition of Investments may result in unfavourable tax consequences.
27. We shall provide the Investment Manager and the Administrator with any additional information which it may reasonably request in connection with tax and or/FATCA regulations/reporting requirements and/or the OECD Common Reporting Standard (“CRS”) or other similar requirements in order to substantiate any representations made by us or otherwise and we authorise the Investment Manager or its agents to disclose such information relating to this application to such persons as they consider appropriate.
28. We agree to promptly provide the Investment Manager and the Administrator with any information (or verification thereof) to comply with any requirement imposed on the Programmes including pursuant to tax and /or FATCA reporting requirements.
29. We hereby acknowledge that if we fail to provide the information on a timely basis, we may be subject to 30% U.S. withholding tax on the investor’s share of “withholdable payments” (as defined for purposes of FATCA) received by the Programme.
30. We hereby acknowledge that if we fail to provide the information and such failure results in the Investment Manager being unable to comply with the Inter Governmental Agreement (“IGA”) and/or the CRS, the Investment Manager may exercise its right to completely redeem an applicant (at any time upon any or no notice). We further acknowledge and agree to indemnify the Investment Manager and its other investors for any losses resulting from our failure to meet its obligations under this Section, including any U.S. withholding tax imposed on the Programmes.
31. I confirm that the Programmes are and/or will be invested in accordance with the Anti-Money Laundering Declaration as outlined in Section 8.

8. ANTI MONEY LAUNDERING DECLARATIONS

I/We acknowledge that measures aimed at the prevention of money laundering will require verification of my/our identity. I/We acknowledge that I/we will not redeem my/our investment until such time as the Administrator has received and is satisfied with all the information and documentation requested to verify my/our identity. I/We acknowledge that the Administrator shall be held harmless against any loss arising as a result of a failure to process my/our application for investment if such information and documentation has been requested by the Administrator but has not been provided by me/us. I/We warrant that the Programmes are to be purchased with funds that are from legitimate sources in connection with my/our regular business activities and which do not constitute the proceeds of crime within the meaning given in the Proceeds of Crime Law (as Revised) of the United Kingdom and the Regulations or Guidance Notes issued pursuant thereto.

Please complete one of the sub-sections below.

Part I. Financial Institutions/Relevant Third Parties (Designated Bodies*)

I/We declare that I am/we are licensed as (description) _____ by the (regulatory body) _____ under the laws of (country) _____ and am/are thereby subject to regulations and/or guidelines which to the best of my/our knowledge and understanding are in accordance with the Financial Action Task Force Recommendations on the prevention of money-laundering and that this application is made in my/our name on behalf of my/our clients whose identity has been properly verified by me/us in accordance with the guidelines.

* A Designated Body is an individual or other entity, which is regulated in respect of the provision of banking or investment services in a country that is a member of the European Union or the Financial Action Task Force.

Part II. Individual Investors

I/We declare that I am/we are private investor(s) who is/are making this application on my/our own behalf and not, in any way as representative(s) of any other party.

Please supply the following documents;

- (a) An original or a certified** copy of your passport, national identity or ID issued by a Government body showing the photograph and signature;
- (b) An original or a certified** copy of a recent utility bill or bank account statement (no more than 6 months old) and;
- (c) Where you are a PEP, confirmation of your wealth is required.

Part III. Corporate Investors Only (For Company/Corporate Applications)

We hereby declare that the corporation was duly registered on _____ under the laws of _____ (country) and that it is not a financial intermediary. We further declare that the following persons are all the Directors of the corporation.

Please supply the following documents;

- (a) Certified** copy of Certificate of Incorporation (or equivalent); and or
- (b) Certified** copy of Memorandum and Articles of Association (or equivalent document showing registered corporate office); and or
- (c) Certified** copy of latest audited financial statements;
- (d) Certified** copy of the corporation or entity's list of authorised signatories;
- (e) List of all directors' names, occupations, residential and business addresses and dates of birth;
- (f) Identification as per individual investor above for two directors or one director and one signatory;
- (g) Details of beneficial owners who own more than 25% of the share capital or voting rights

The Administrator may also, without limitation, seek confirmation of shareholders and require additional information and/or documentation relating to the Directors.

Part IV. Partnership or Trust Investors

Please supply the following documents;

- (a) Identification as per individual investor above for two Trustees or one Trustee and one authorised signatory / General Partner or two partners and one authorised signatory;

- (b) Details of beneficial owners who own more than 25% of the share capital or voting rights;
- (c) Evidence of the above partners'/trustees' authority to make investments in the Programme on behalf of the partnership/trust;
- (d) Certified** authorised signatory list; and
- (e) Certified** copy of partnership agreement/trust deed

Part V. Intermediaries, Agents and Nominees

As an intermediary/ agent/ nominee authorised and regulated for anti-money laundering purposes acting on behalf of a third party, please sign below.

I/we (name and address of agent/Intermediary) _____

 confirm that we are regulated in _____ (insert jurisdiction) by _____ (name of regulator).

We undertake to verify the identity of all third parties on whose behalf we Invest. We further undertake to retain for five years from the date the subscriber redeems from the Programme copies of any documentation obtained by us in so verifying and if/when requested to do so by the Investment Manager, provide copies of said documentation.

We confirm the following in connection to the investor:

1. We/the investor* has performed the anti-money laundering and counter terrorist financing identification for any parties on whose behalf the investor is purchasing Investments ('underlying investors').
2. The evidence we/the investor* has obtained to verify the identity of the underlying investors, and where appropriate, their beneficial shareholders, meets the requirements of our national anti-money laundering and counter terrorist financing legislation and regulations.
3. We confirm that all documents and information, which we/the investors may have on our /the investor's files relating to the identity of each underlying investor will be sent to the Administrator of the Programmes as soon as practicable upon request subject to appropriate rules and regulations.
4. We/the investor* will take measures to ensure that the underlying investors are neither individuals nor institutions against whom sanctions have been imposed by the EU or United Nations or persons or entities that are included on the List of Specially Designated Nationals and Blocked Persons maintained by the U.S Treasury's Department's Office of Foreign Asset Control ('OFAC').
 (* delete as appropriate)

<i>Agent Name</i>	
<i>Agent Number</i>	<i>Signature</i>

Please include an original or certified copy of authorised signatory list

By signing this application form the signatory confirms that he/she is duly authorised to sign this declaration on behalf of the intermediary/agent/nominee.

** All certified copies should be certified by a Notary Public, Solicitor, chartered & certified public accountants, Company Registrar, embassy consular staff, police officer or FATF regulated financial institution any person so authorised under the laws of your country of residence or domicile (except the authorised signatories list may be certified by the company secretary). Copies must be marked "true copy or original document" and stamped by the certifying party.

9. NOTES

1. Terms used in this Application Form are defined in the Prospectus.
2. If the application is sent by facsimile, the original must be sent by post to the Administrator to be received by the Administrator as set out in the Prospectus.
3. Applications for an initial subscription must be for an amount of not less than €10,000 (or its equivalent in CHF, GBP or USD).

4. The relevant Bank Instruction Letter must be completed for the purposes of paying subscriptions. The bank should also be instructed to fax the Administrator or agent with details of the transfer it is making.
5. Once completed applications have been received by the Administrator, they are irrevocable.
6. Investments are registered in the Company's Register of Investors under the Custodian or a nominee name. However, in such circumstances actual ownership will be discernible from Administrator's records.
7. In the case of corporate Investors, signatories may be required to produce evidence of authority.
8. The Portfolio Manager reserve the right from time to time to resolve to close any Programmes to new subscriptions, either for a specified period or until they otherwise determine. During any such period that Programme will not be available for subscription.

10. CONFIRMATION AND SIGNATURE

I confirm that I have read and that I am bound by the terms and conditions of this Original Account Agreement in connection with my Investments in the Programmes. I acknowledge that I have read the current Discretionary Fund Management Agreement, Discretionary & Execution Services Terms, Discretionary Fund Management Programmes and Minimum Investment & Fee Schedule and for the relevant Programme that I intend to subscribe for, shall be the sole basis for Investments. No other information or representations may be relied upon.

The Application Form must be signed by each applicant. In the case of applications by partnerships, proprietorships or other unincorporated associations or firms, the applications should be signed by all the partners/proprietors. In the case of applications by corporations, applications should be executed under seal or signed by a duly authorised person(s) who should indicate their representative capacity. In the case of trusts, applications should be made in the individual names of the trustees and should be accompanied by duly certified documentation. If this application form is signed under power of attorney, such power of attorney or a duly certified copy thereof must accompany this application.

First Applicant:

<i>Name of the Applicant</i>	
<i>Address</i>	
<i>Capacity of Authorised Signatory</i>	
<i>Date (dd/mm/yyyy)</i>	<i>Signature</i>

Joint Applicants:

<i>Name</i>	<i>Signature</i>
<i>Name</i>	<i>Signature</i>
<i>Name</i>	<i>Signature</i>
<i>Date (dd/mm/yyyy)</i>	

TAX CLASSIFICATION AND TAX RESIDENCY FORM

The information requested in this section is being collected for the purposes of tax reporting obligations imposed on the Investment Manager pursuant to FATCA and the OECD Common Reporting Standard (the "CRS"). This information collected by the Investment Manager will be reported to the UK Inland Revenue. In turn, the UK Inland Revenue will exchange the information collected from each Applicant with the tax authority of their country of residence, where that country has implemented the CRS regime, or with the Inland Revenue Service of the United States where that person is a US Reportable Person for FATCA purposes. Applicants can obtain more information on the Investment Manager's tax reporting obligations on the website of the UK Inland Revenue.

There are two different certifications in this section. Applicants only need to complete one of these certifications. Each Applicant should complete the certification below that is applicable to the Applicant for the purposes of providing the Investment Manager with the information required for FATCA and CRS purposes. Each Applicant that is not an individual should complete the information requested in the section entitled 'Entity Self-Certification for FATCA and CRS'. In some cases, persons who 'control' such Applicants may also need to complete appropriate certification, as explained below. Each Applicant that is an individual should complete the section entitled 'Individual (Controlling Person's) Self-Certification for FATCA and CRS'.

A. Individual (Controlling Person's) Self-Certification for Foreign Account Tax Compliance ACT ("FATCA") and Common Reporting Standards ("CRS")

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 in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Programmes with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please speak with your tax adviser. For further information on FATCA or CRS please refer to the OECD CRS Information Portal at: <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

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

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

Investor Identification

<i>Investor Name</i>		
<i>Current Residential Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>
<i>Town or City of Birth</i>	<i>Country of Birth</i>	
<i>Date of Birth (dd/mm/yyyy)</i>	<i>Passport/Registration Number</i>	

Mailing Address (if different from above)

<i>Current Residential Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>

FATCA Declaration of U.S. Citizenship or Residence for Tax Purposes

Please tick either and complete as appropriate.

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

Or

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

CRS Declaration of Tax Residency (you may choose more than one country)

Please indicate your/ the investor’s country of tax residence (if resident in more than one country please detail all countries of tax residence and associated taxpayer identification numbers (“TIN”). Please see the CRS Portal for more information on Tax Residency.

<i>Country of Tax Residency</i>	<i>Tax ID Number</i>
<i>Country of Tax Residency</i>	<i>Tax ID Number</i>
<i>Country of Tax Residency</i>	<i>Tax ID Number</i>

Please note TN is required. If a TIN is unavailable, please tick the appropriate box below.

- Country where I am liable to pay tax does not issue TINs to its residents;
- The Account Holder is otherwise unable to obtain a TIN or equivalent number (Please explain why you are unable to obtain a TIN in the below table if you have selected this reason);
- No TIN is required. (Note. Only select this reason if the authorities of the country of tax residence entered below do not require the TIN to be disclosed).

Type of Controlling Person

(ONLY to be completed by any individual who is a Controlling Person of an entity investor which is a Passive Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution) For joint or multiple Controlling Persons please complete a separate Self-Certification form for each Controlling Person.

Type of Controlling Person Under CRS	Entity Name	Selection
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 legal person – settler		
Controlling Person of a legal person – trustee		
Controlling Person of a legal person – protector		
Controlling Person of a legal person – beneficiary		
Controlling Person of a legal person – other		
Controlling Person of a legal arrangement (non-trust) – settler equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary -equivalent		
Controlling Person of a legal arrangement (non-trust) – other -equivalent		

Declaration and Undertakings

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

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

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

<i>Name</i>	
<i>Capacity of Authorised Signatory</i>	
<i>Date (dd/mm/yyyy)</i>	<i>Authorised Signature</i>

B. Entity Self-Certification for Foreign Account Tax Compliance ACT (“FATCA”) and Common Reporting Standards (“CRS”)

Investor Identification

<i>Investor Name</i>		
<i>Country of Incorporation or Organisation</i>		
<i>Current registered Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>

Mailing Address (if different from above)

<i>Current Residential Address</i>		
<i>Town/City</i>	<i>Postcode</i>	<i>Country</i>

FATCA Declaration of U.S. Citizenship or Residence for Tax Purposes

Please tick either and complete as appropriate.

I confirm that the Entity is a Specific U.S. Person and the Entity’s U.S. Federal Taxpayer Identifying number (US TIN) is as follows

Or

The Entity is not a Specific U.S. Person (please complete sections below)

The Entity is a U.S. Person but not a Specific U.S. Person (please complete sections below)

Entity’s FATCA Classification (please note, your classification may differ from CRS classification below)

Financial Institutions under FATCA

EU Financial Institution or a Partner Jurisdiction Financial Institution	
Registered Deemed Compliant Foreign Financial Institution	
Participating Foreign Financial Institution	

Please provide the Entity’s Global Identification Number (GIN:)

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

The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN Please provide the sponsor’s name and sponsor’s GIIN : Sponsor’s Name: Sponsor’s GIIN: 	
Exempt Beneficial Owner	
Certified Deemed Compliant Foreign Financial Institution	
Non-Participating Foreign Financial Institution	
Excepted Foreign Financial Institution	

Non-Financial Institutions under FATCA

If the Entity is not a Financial Institution, please tick one of the below categories.

Active Non-Financial Foreign Entity	
Passive Non-Financial Foreign Entity (If this box is ticked, please include self-certification forms for each of your Controlling Persons)	
Excepted Non-Financial Foreign Entity	

CRS Declaration of Tax Residency (please note that you may choose more than one country)*

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")).

Note: Provision of a Tax ID number (TIN) is required unless you are tax resident in a Jurisdiction that does not issue a (TIN).

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.

Please indicate your/ the investor's country of tax residence (if resident in more than one country please detail all countries of tax residence and associated taxpayer identification numbers ("TIN")). Please see the CRS Portal for more information on Tax Residency.

<i>Country of Tax Residency</i>	<i>Tax ID Number</i>
<i>Country of Tax Residency</i>	<i>Tax ID Number</i>
<i>Country of Tax Residency</i>	<i>Tax ID Number</i>

Entity's CRS Classification

Please note an Entity's CRS classification may differ from its FATCA classification on page 15):

For more information please see the CRS Standard and associated commentary.

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

Financial Institutions under CRS

Financial Institution under CRS (other than below)	
An Investment Entity located 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 and complete a separate individual self-certification forms for each of your Controlling Persons **)	

Non-Financial Institutions under CRS

Active Non-Financial Entity – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation	
Active Non-Financial Entity – a Government Entity or Central Bank	
Active Non-Financial Entity – an International Organisation	
Active Non-Financial Entity – other than the first two categories above (for example a start-up NFE or a non-profit NFE)	
Passive Non-Financial Entity ((If this box is ticked, please complete a separate Individual Self-Certification Form for each of your Controlling Person(s))	

**Controlling Person's:

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 more information please see the CRS Standard and associated commentary.

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

Declaration and Undertakings

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.
I acknowledge that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.
I undertake to advise the recipient immediately and provide an updated Self-Certification form where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

<i>Name</i>	
<i>Capacity of Authorised Signatory</i>	
<i>Date (dd/mm/yyyy)</i>	<i>Authorised Signature</i>

REDEMPTION

I/we hereby wish to redeem from the following Investment Programmes in accordance with the Terms and Conditions and the Discretionary Fund Management Agreement.

DFM Programme	ID	Class	Amount
Defensive	FA0012282500	EUR	
	FA0012282501	CHF	
	FA0012282502	GBP	
	FA0012282503	USD	
Moderate	FA0012282600	EUR	
	FA0012282601	CHF	
	FA0012282602	GBP	
	FA0012282603	USD	
Balanced	FA0012282700	EUR	
	FA0012282701	CHF	
	FA0012282702	GBP	
	FA0012282703	USD	
Dynamic	FA0012282800	EUR	
	FA0012282801	CHF	
	FA0012282802	GBP	
	FA0012282803	USD	
Sustainable	FA0012282900	EUR	
	FA0012282901	CHF	
	FA0012282902	GBP	
	FA0012282903	USD	

Name

Capacity of Authorised Signatory

Date (dd/mm/yyyy)

Authorised Signature