

Application Form

IMPORTANT

- INVESTORS SHOULD ENSURE THAT THE ORIGINAL APPLICATION FORM IS RETURNED BY POST TO THE ADMINISTRATOR AT THE ADDRESS BELOW. FAILURE TO RETURN THE ORIGINAL APPLICATION FORM AND SUPPORTING DOCUMENTATION WILL DELAY THE PAYMENT OF REDEMPTION PROCEEDS (AND DIVIDENDS/DISTRIBUTIONS IF APPLICABLE).
- INVESTORS SHOULD ENSURE THE SECTION HEADED “SIGNATURE” ON PAGE 21 HAS BEEN SIGNED BEFORE RETURNING THIS TO THE ADMINISTRATOR.

ADMINISTRATOR

Mailing Address:

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

Registered Address:

Northern Trust International Fund Administration Services (Ireland) Limited
George’s Court
54-62 Townsend Street
Dublin 2
D02 R156
Ireland

Telephone: +353 1 434 5122

Facsimile: +353 1 531 8545

Email: CRM_TA_Queries@ntrs.com

For any KIID related queries, please contact ucitsinfo@crmlc.com.

Please ensure that you have read the Prospectus and the Key Investor Information Document (the “KIID”) before completing this Application Form. The KIID is available at the Investment Manager’s website www.crmucits.com

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

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

Please complete this Application Form in blue or black ink using BLOCK CAPITALS.

This Application Form, together with the Money Laundering Verification Requirements and the Declaration of Irish Residence outside Ireland¹, constitutes your agreement to subscribe for Shares in the Fund. You should post or email this Application Form (in which case the original Application Form and supporting documentation must also be forwarded) to the Administrator at the address on the cover page;

INVESTOR TAX RESIDENCY

PLEASE TICK (✓) THE RELEVANT BOX

NON-U.S. TAXPAYER

SELECT SUB-FUND

PLEASE TICK (✓) THE RELEVANT BOX

CRM US Equity Opportunities

Please tick (✓) the Class (es) of Shares of CRM US Equity Opportunities in which the investment will be made

Base Currency of CRM US Equity Opportunities: USD

Class of Shares	Class Currency	Please tick relevant (✓) as appropriate
Class A Shares	USD	
Class C Shares	USD	
Class S Shares	USD	

CRM Long/Short Opportunities UCITS

Please tick (✓) the Class (es) of Shares of CRM Long/Short Opportunities UCITS in which the investment will be made

Base Currency of CRM Long/Short Opportunities UCITS: USD

Class of Shares	Class Currency	Please tick relevant (✓) as appropriate
Class A USD Shares	USD	
Class B USD Shares	USD	
Class B EUR Shares	EUR	
Class B GBP Distributing Shares	GBP	
Class F USD Shares	USD	
Class G USD Shares	USD	
Class G EUR Shares	EUR	
Class G GBP Distributing Shares	GBP	

CRM U.S. Small Cap Opportunities UCITS

Please tick (✓) the Class (es) of Shares of CRM U.S. Small Cap Opportunities UCITS in which the investment will be made

Base Currency of CRM U.S. Small Cap Opportunities UCITS: USD

Class of Shares	Class Currency	Please tick relevant (✓) as appropriate
Class A Shares	USD	
Class B Shares	USD	

Note: In accordance with the terms of the Prospectus, payment in respect of the issue of Shares must be made by the relevant Settlement Date by electronic transfer in cleared funds in the currency of denomination of the relevant Class of the Shares. If payment in full has not been received by the Settlement Date, or in the event of non-clearance of funds, the allotment of Shares made in respect of such application may, at the discretion of the Administrator, be cancelled, or, alternatively, the Administrator may treat the application as an application for such number of Shares as may be purchased with such payment on the Dealing Day next following receipt of payment in full or of cleared funds.

¹ Only applicable to Irish domiciled funds.

PLEASE COMPLETE EITHER THE “MONETARY AMOUNT” OR THE “NO. OF SHARES” FIELD

Name of Fund	
Share Class	

Monetary Amount	
Number of Shares	
Amount in Words	

NAME(S) FOR REGISTRATION (BLOCK CAPITALS)	
SHAREHOLDER 1	SHAREHOLDER 2
First Name & Family Name/Company Name <input type="text"/>	First Name & Family Name/Company Name <input type="text"/>
Street 1 <input type="text"/>	Street 1 <input type="text"/>
Street 2 <input type="text"/>	Street 2 <input type="text"/>
Town/Country/Postcode <input type="text"/>	Town/Country/Postcode <input type="text"/>
Contact Telephone Number <input type="text"/>	Contact Telephone Number <input type="text"/>
Email Address <input type="text"/>	Email Address <input type="text"/>
SHAREHOLDER 3	SHAREHOLDER 4
First Name & Family Name/Company Name <input type="text"/>	First Name & Family Name/Company Name <input type="text"/>

Street 1 <input type="text"/>	Street 1 <input type="text"/>
Street 2 <input type="text"/>	Street 2 <input type="text"/>
Town/Country/Postcode <input type="text"/>	Town/Country/Postcode <input type="text"/>
Contact Telephone Number <input type="text"/>	Contact Telephone Number <input type="text"/>
Email Address <input type="text"/>	Email Address <input type="text"/>
Mailing address (if different from the address of the first names holder) <input type="text"/>	

Details Required Pursuant to the European Union (Anti-Money Laundering: Beneficial Ownership of Corporate Entities) Regulations 2016 (SI No. 560 of 2016) (the "Beneficial Ownership Regulations")

Country in which Shareholder is ordinarily tax resident: _____

Tax ID number of Shareholder: _____

Town and Country of Birth: _____

Confirm whether listed or not listed: _____

If listed, confirm whether subject to the requirements of the transparency directive² or equivalent standards regarding transparency of ownership (specifying applicable regime)³:

Confirm whether beneficial owner is:

- Same as account owner (If so, you must complete Part 2 below)
 Third party (account owner is an intermediary) (If so, you must complete Part 1 and Part 2 below)

Part 1: Third Party and Intermediary Information Complete *ONLY* if account owner is an intermediary.

Third party beneficial owner(s) name(s):
Type of investor (individual, corporate, pension fund, etc.):
Name of regulator where intermediary is regulated:

² Directive 2004/109/EC of the European Parliament and of the Council of 15 December 2004 on the harmonisation of transparency requirements in relation to information about issuers whose securities are admitted to trading on a regulated market and amending Directive 2001/34/EC.

³ Note the Company in its sole discretion retains power to decide on equivalence of any other regime.

If listed, confirm whether subject to the requirements of the transparency directive⁴ or equivalent standards regarding transparency of ownership (specifying applicable regime)⁵:

Part 2: Beneficial Owners and the Beneficial Ownership Regulations

Please tick here where the account holder or, if the account holder is an intermediary, the third party beneficial owner is listed on a regulated market and subject to disclosure requirements consistent with Union law⁶ or subject to equivalent standards which ensure adequate transparency of ownership information:

Where sub-paragraphs (A) or (B) below are relevant, the following table must also be completed in order to enable the Company to comply with the Beneficial Ownership Regulations. If you become aware that you are a "beneficial owner" of the Company (as that term is defined in the Beneficial Ownership Regulations) you have certain legal obligations to provide the Company with relevant information, in particular any changes to the information below (including if you become aware that you have ceased to be a beneficial owner) (a "**Relevant Change**"). Please see the "Representations and Warranties" section in respect of the statutory obligations of the Company.

- (A) If either (i) the beneficial owner is a natural person, and is the same as the account holder or (ii) the third party beneficial owner is a natural person please provide all information below.
- (B) If either (i) the account holder named in the "Name(s) for Registration" section of this Agreement above or (ii) the third party beneficial owner named in Part 1 above is **not** a natural person, please provide the following information for:
- each shareholder (or equivalent) that is a natural person with at least 25% ownership or control of the subscribing entity; and
 - where shareholder(s) (or equivalent) in the subscribing entity is/are an entity, any natural person(s) indirectly having at least 25% ownership or control of each relevant shareholder entity.

Name (first name, surname):	Residential address:
Date of birth:	Nationality:
Statement of (I) the nature and (II) the extent of the interest in the Company held by the relevant natural person as beneficial owner:	

For Intermediaries Only

Is this information being provided with the knowledge of the relevant natural person? (yes or no):

Dealing Procedure

All applications in relation to the Shares in the Company must be received before the time(s) specified in the Company's Prospectus and relevant Fund Supplement as the case may be, together, the "Prospectus") Applications received after such time will generally be deemed to have been received for the next relevant Dealing Day unless the Directors shall, in exceptional circumstances, otherwise agree, with the consent of the Administrator, to accept one or more applications received after the Dealing Deadline for processing on that Dealing Day provided that such applications are received before the relevant Valuation Point.

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

⁴ Directive 2004/109/EC of the European Parliament and of the Council of 15 December 2004 on the harmonisation of transparency requirements in relation to information about issuers whose securities are admitted to trading on a regulated market and amending Directive 2001/34/EC.

⁵ Note the Company in its sole discretion retains power to decide on equivalence of any other regime.

⁶ Including the Transparency Directive (as defined in footnote (1)).

⁷ For example, whether shares will be held by a natural person directly or indirectly via the account owner (or both), or control is exercised via other means (e.g. a right to issue binding directions affecting financial/operational policies under a shareholder agreement with the investor), and (ii) number of shares subscribed for if account holder is a natural person (with a breakdown of direct and indirect ownership as appropriate) or percentage of shares/voting rights held by a natural person in the investor. Please attach a continuation sheet if the space herein is insufficient

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

CRM U.S. Equity Opportunities UCITS

Class of Shares	Minimum Initial Investment Amount
Class A Shares	\$100,000*
Class C Shares	\$100,000,000*
Class S Shares	\$100,000*

CRM Long/Short Opportunities UCITS

Class of Shares	Minimum Initial Investment Amount
Class A USD Shares	\$10,000*
Class B USD Shares	\$50,000,000*
Class B EUR Shares	\$50,000,000 or currency equivalent*
Class B GBP Distributing Shares	No minimum
Class F USD Shares	No minimum
Class G USD Shares	\$50,000,000*
Class G EUR Shares	\$50,000,000 or currency equivalent*
Class G GBP Distributing Shares	\$50,000,000 or currency equivalent*

CRM U.S. Small Cap Opportunities UCITS

Class of Shares	Minimum Initial Investment Amount
Class A USD Shares	\$50,000,000*
Class B USD Shares	\$100,000*

*The Directors may waive such Minimum Initial Investment Amount in their absolute discretion.

Banking Details - THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS

BANK ACCOUNT DETAILS FOR SETTLEMENT OF REDEMPTION (AND DIVIDEND/DISTRIBUTION PROCEEDS IF APPLICABLE)

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

IMPORTANT INFORMATION REGARDING BANK ACCOUNTS FOR SUBSCRIPTIONS AND REDEMPTIONS: THIRD PARTY PAYMENTS ARE NOT PERMITTED FOR REDEMPTIONS. PLEASE CONFIRM THE DETAILS OF THE BANK ACCOUNTS FROM WHICH AND TO WHICH PAYMENTS WILL BE MADE BELOW. A RECENT BANK STATEMENT (NO MORE THAN 6 MONTHS OLD), OR A BANKER'S REFERENCE, MUST ACCOMPANY THE APPLICATION TO EVIDENCE THAT THE BANK ACCOUNT DETAILS PROVIDED FOR SUBSCRIPTIONS AND REDEMPTION PAYMENTS ARE FOR A BANK

ACCOUNT IN THE REGISTERED HOLDER'S ACCOUNT NAME. ACCOUNTS IN THE NAME OF REGULATED ENTITIES ARE EXEMPT FROM THIS REQUIREMENT. PLEASE SEE BELOW FOR FURTHER DETAILS OF BANK ACCOUNT EVIDENCE REQUIREMENTS:

BANK ACCOUNT EVIDENCE DOCUMENTATION MUST INCLUDE ONE OF THE BELOW:

- **ORIGINAL OR COPY PRINTED BANK STATEMENTS ON HEADED PAPER SHOWING THE INVESTOR'S NAME, ADDRESS AND ACCOUNT DETAILS OR**
- **PRINTED CORRESPONDENCE FROM THE BANK WHICH CONFIRMS THE INVESTOR'S ACCOUNT NAME, ADDRESS AND ACCOUNT DETAILS, DULY CERTIFIED AS A TRUE COPY OF THE ORIGINAL**

NOTE: A REQUEST TO CHANGE BANK ACCOUNT DETAILS MUST BE MADE IN WRITING TO THE ADMINSTRATOR AND MUST BE ACCOMPANIED BY A BANK STATEMENT OR BANKER'S REFERENCE.

NOTES:

- (a) Requests for redemption or distribution payments to be made by telegraphic transfer will be subject to bank charges. Such charges will normally be payable by the Shareholder although the Company has the discretion to determine that these charges should be borne by the Company or the relevant Fund.
- (b) If subscribing for Shares in more than one Fund investors must clearly mark the payment reference accounts for each particular Fund and the sub-account.
- (c) The Base Currency of the Fund and the designated currency of any Shares will be set out in the Prospectus and is also noted above. Applications for Shares shall be accepted in the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share Class. At the discretion of the Company, applications may be accepted in currencies other than the Base Currency.
- (d) Any subscription proceeds paid in currencies other than the Base Currency of the relevant Fund or the designated currency of the relevant Share Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be arranged by the Administrator at the cost and risk of the relevant investor. This may result in a delay in processing the application.

Please ensure that you have read the Prospectus before completing this Application Form. Defined terms used in this Application Form are those used in the Prospectus (unless the context otherwise requires).

Method of Payment

Please pay monies in accordance with the deadlines outlined in the Prospectus.
Please remit payment to the following bank account:-

Note: *Monies must come from the account of the investor.*

New Standard Settlement Instructions (SSI's)

U.S. Dollar
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
SWIFT: CNORUS33
Fedwire ABA: 026001122
CHIPS ABA: 0112
Beneficiary: CRAMER ROSENTHAL MCGLYNN UCITS PLC - 179374-20010
Reference: *Contract number if available – otherwise insert shareholder name and sub-fund / share class invested
Euro – EUR
Intermediary Bank: Barclays Bank PLC, Frankfurt
SWIFT: BARCDEFF
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
Account Number: 0210472800
SWIFT: CNORUS33
Beneficiary: CRAMER ROSENTHAL MCGLYNN UCITS PLC - 639302-20019
Reference: * Contract number if available – otherwise insert shareholder name and sub-fund / share class invested
Swiss Franc – CHF
Intermediary Bank: Credit Suisse AG, Zurich
SWIFT: CRESCHZZ80A
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
SWIFT: CNORUS33
Beneficiary: CRAMER ROSENTHAL MCGLYNN UCITS PLC – 647727-20019

Reference: (add applicable reference information)
British Pound - GBP
Intermediary Bank: Barclays Bank PLC, London
SWIFT: BARCGB22
Beneficiary Bank: The Northern Trust International Banking Corporation, New Jersey
SWIFT: CNORUS33
Beneficiary: CRAMER ROSENTHAL MCGLYNN UCITS PLC – 647719-20019
Reference: (add applicable reference information)

Please specify your Ordering Institution details for subscriptions

Currency _____ Correspondent Bank _____
 Swift/ABA _____ Account Number _____

Return of Values (Investment Undertakings) Regulations 2013

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

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

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

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

Your personal information will be handled by the Administrator or it's duly appointed delegates as Data Processor for the Company in accordance with the with the General Data Protection Regulation (Regulation 2016/679). 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.



Cramer Rosenthal McGlynn UCITS plc
Anti-Money Laundering Verification Requirements in accordance with
The Criminal Justice (Money Laundering and Terrorist Financing) Act, 2010, as amended

Guide to completing this form.

Part I This section must be completed by all applicants and transferees

Part II This section can only be completed by **banks, providers of financial services and nominee companies** acting on their own account and if authorised and regulated in Australia, Austria, Belgium, Bulgaria Canada, Channel Islands, Denmark, Finland, France, Germany, Greece, Hong Kong, Iceland, Ireland, Isle of Man, Italy, Japan, Luxembourg, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom or the USA.

Part III This section is only applicable to **individual & joint account investors** investing directly into the Company, i.e. not through an intermediary

Part IV This section is applicable to **Intermediaries, Financial Agents and Nominees** acting on behalf of third parties.

Part V This section is to be completed if an **unregulated Nominee Company** is acting as intermediary or nominee for investors and the Nominee Company is owned by a Relevant Third Party.

Part VI To be completed by **all individual & joint account investors** who are EU residents not residing in Ireland.

Part VII To be completed by a Politically Exposed Persons (as defined below) if investing in the Fund

Part VIII This section is applicable to **other investors** investing directly into the Company.

PART I - ALL

Full name(s) and full current permanent address/registered office of applicant(s)/transferee(s):

Mr/Mrs/Miss/Ms/Company Name: _____

Address/Registered Office: _____

Date of Birth ¹(if applicable): _____

Country of Birth/Registration: _____

Full name where applicable of any beneficial owner of investor who owns more than 25% of Company/Partnership/CIS/Trust/LLP:

1. _____ 2. _____

3. _____ 4. _____

DECLARATION - I/We declare that the information contained in this form, including the section entitled "Representations and Warranties" at pages 13 to 17, and any attached documentation is true and accurate to the best of my/our knowledge and belief.

Date: _____

Signed: 1. _____ Signatory capacity if applicable
(i.e. Director/manager) _____

2. _____

3. _____

4. _____

In the case of joint holders, ALL holders must complete this declaration.

¹ Must be over 18 years of age.

PART II – Financial Company, Bank, Nominee, etc.

Please tick the following box, if appropriate:

I/We are a bank/provider of financial services or a nominee company/nominee account which is part of/used by a bank/provider of financial services authorised and regulated in Australia, Austria, Belgium, Canada, Channel Islands, Denmark, Finland, France, Germany, Greece, Hong Kong, Iceland, Ireland, Isle of Man, Italy, Japan, Luxembourg, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom or the USA acting for our own account.

YES

If answer is Yes, please supply the name of regulated entity and also the name of your regulator:

If you are acting on behalf of a third party see Part IV

PART III - Individuals and Joint Account Holders

**If you, as applicant(s) or transferee(s) are an Individual please supply the following documents.
In the case of joint account holders, please supply the relevant documentation in respect of all holders.**

A copy photographic identity document and **one** copy proofs of address

Note: the Company or the Administrator may require further documentation to be provided upon written request.

PART IV - To be completed by Financial Agents, Nominees and Intermediaries

As an intermediary/agent/nominee company authorised and regulated in Australia, Austria, Belgium, Bulgaria, Canada, Channel Islands, Denmark, Finland, France, Germany, Greece, Hong Kong, Iceland, Ireland, Isle of Man, Italy, Japan, Luxembourg, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom and the USA you must provide;

Standard reliance letter (Appendix 2)
Relevant Third Party's Authorised Signatory List
Proof of regulatory status of Relevant Third Party

PART V – If Nominee Company is unregulated and is acting as intermediary or nominee for investors and the nominee company is owned by a Relevant Third Party

If the Nominee Company is unregulated and is acting as intermediary or nominee for investors the following documents are required;

Standard reliance letter (Appendix 3)
Proof of regulatory status of Relevant Third Party or
Documentation in accordance with the legal form of the Nominee Company

PART VI – Politically Exposed Persons

Please confirm whether you are a **Politically Exposed Person (PEP)**

YES:

NO:

A **Politically Exposed Person** is defined as an individual who is or was at any time in the preceding year entrusted with a prominent public function and their immediate family members or persons known to be close associates of such persons.

Required Identity Verification Documentation

Individual - please provide

- 1. Certified copy of proof of Photo ID such as Passport or Drivers' License and
- 2. Certified copy of proof of address verification document, i.e. utility bill / bank statement at current residential address dated within the last **three** months
- 3. Source of Funds
- 4. Source of Wealth

Note: Proof of address options are as follows and must be dated within the last **three** months- (mobile telephone bills not acceptable): Bank/credit card statements, mortgage statements, mortgage bond statements, utility bills, household/motor insurance certificate, local authority documentation, municipality rates invoice, correspondence from the revenue, pay slip or salary advise (with address).

Note: In terms of certified documents, this means that there is an original signature on the document from a suitable person confirming the documents are a true copy of the original, and they will need to sign and date it, printing their name, occupation, address, telephone number and email address. Suitable persons include any of the following; practicing solicitors, embassy consular staff, financial institutions, medical professions, notaries public. The person certifying the documents shouldn't be related to you, living at the same address or in a relationship with you.

A. Source of Funds

Please provide details of source of funds (how the funds to pay for the investment have been accumulated):

Earnings from Employment/Self Employment	<input type="checkbox"/>	Inheritance or Gift	<input type="checkbox"/>
Investment Income	<input type="checkbox"/>	Matured Investment	<input type="checkbox"/>
Lump Sum Retirement	<input type="checkbox"/>	Court Award	<input type="checkbox"/>
Sale of Property	<input type="checkbox"/>	Other – please specify below	<input type="checkbox"/>
Other	<input type="text"/>		

B. Source of Wealth

Please provide a brief description of your source of wealth (how your overall wealth has been accumulated):

PART VII– OTHER INVESTORS (Standard Customer Due Diligence)

If you, as applicant or transferee, fall under one of the investor categories outlined below please provide documents evidencing the requested information.

Listed Company

For a Listed Company in a Prescribed Country Proof of Listing on a recognised stock exchange in a Prescribed Country and Authorised Signatory List. Otherwise see below.

Proof of listing of the company.

Full name of the company.

Registered number of the company.

Registered office address of the company.

Principal business address of the company.

Details of Directors of the company.

Proof of identity of two Directors or one Director and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Verify (by providing documentation as per entity type) any beneficial owners who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company. Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).

Verification of identity from:

Search of the relevant company registry; or

Copy of Certificate of incorporation or equivalent; or

Copy of Memorandum and Articles of Association or equivalent; or

Copy of latest audited financial statements.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Private and Unlisted Company

Full name of the company.

Registered number of the company.

Registered office address of the company.

Principal business address of the company.

Details of directors of the company.

Proof of identity of two directors or one director and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Verify (by providing documentation as per entity type) any beneficial owners who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company.

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

Verification of identity from

Search of the relevant company registry; or

Copy of Certificate of incorporation or equivalent; or

Copy of Memorandum and Articles of Association or equivalent; or

Copy of audited financial statements.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Partnership

1. Full name of the partnership.

2. Registered office address and principal business address of the partnership.

3. Where not a Partnership Fund, identify all partners, verify the identity of two partners or one partner and one authorised signatory and verify the identity of any partners who own more than 25% of the partnership capital, profit or voting rights or otherwise exercise control over the management of the partnership; or

4. If a Partnership Fund, identify and verify the identity of the General Partner, identify all partners, verify the identity of two partners or one partner and one authorised signatory and verify the identity of any partners who own more than 25% of the partnership capital, profit or voting rights or otherwise exercise control over the management of the Partnership Fund. (If individuals, one copy proof of ID and one copy proof of address)

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

5. Constitutional Document (e.g. Partnership Agreement).

6. Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

LLC

Full name of the LLC.

Registered office address of the LLC.

Principal business address of the LLC.

Details of Managing Members.

Verification of identity of two Managing Members or one Managing Member and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Verify (by providing documentation as per entity type) members who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the LLC.

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

Constitutional Document (e.g. Certificate of formation).

Operating agreement.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Collective Investment Scheme

Full name of CIS.

Registered address of CIS.

Prospectus or equivalent.

Name and address of scheme promoter.

Name and address of scheme administrator.

Name and address of entity carrying out anti-money laundering checks upon the scheme investors and confirmation that entity is regulated for AML purposes.

Verify (by providing documentation as per entity type) any investors who own more than 25% of the share capital.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Trust, Foundation or similar entity

Full name of trust, foundation or similar entity.

Registered address of trust, foundation or similar entity.

Legal form of the trust, foundation or similar entity.

Trust deed or equivalent or confirmation of the entity to an appropriate register.

Nature / purpose of the Trust, foundation or similar entity.

Details of all trustees

Verification of identity of two trustees or one trustee and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Verify (by providing documentation as per entity type) any beneficial owners who own more at least 25% of the share capital or voting rights or otherwise exercises control over the trust.

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

Verification of identity of settler.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Pension Scheme

For an employee sponsored pension scheme in the EU proof of registration from the relevant tax authorities and an authorised signatory list. Otherwise items 1-6 below.

Full name of the pension scheme.

Registered office address of the pension scheme.

Authorised signatory list of the controllers of the pension scheme.

Confirmation of registration (as appropriate) from the relevant tax authorities or pension's board or items listed below.

Verification of identity of Trustees/Directors/ Governors /Board Members or equivalent. (If individuals, one copy proof of ID and one copy proof of address)

Constitutional/Formation Document (e.g. Trust Deed).

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Charity

Extract from the relevant Charities Register e.g. UK Charities Commission or items listed below.

Full name of the charity.

Nature/purpose including the nature of the funding of the charity.

Registered office address of the charity.

Principal business address of the charity.

Details of Trustees/Directors/ Governors/Board Members or equivalent.

Verification of identity of two Trustees / Directors/Governors/Board Members or one Trustee/ Director/Governor/ Board Member and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Verification of identity of beneficiaries (where ascertainable).

Constitutional/Formation Document.

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Club or Society

Full name of the club/society.

Registered office address of the club/society.

Nature/Purpose including the nature of funding of the club/society.

Confirmation of the legal status of the club/society.

Constitutional/Formation Document (e.g. Trust Deed) and / or copy of audited financial statements (if available).

List of officers of the club/society.

Verification of identity of two officers of the Club/Society or one officer and one authorised signatory (If individuals, one copy proof of ID and one copy proof of address)

Authorised signatory list.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Government / Public Body

For a Government/Public Body in a Prescribed Country background from a reliable source (e.g. internet search) and Authorised Signatory List. Otherwise see below.

Full name of the government/public authority.

Nature and status the government/public authority.

Registered office address of the government/public authority.

Name of the home state authority and nature of its relationship with the government/public authority.

Ownership of the government/public authority.

Names of main public body officials.

Verify (by providing documentation as per entity type) all persons who own or control over 25% of the entity's share capital, profit or voting rights or otherwise exercises control over the management of the entity.

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

Authorised signatory list.

Appropriate background information on the entity (e.g. via internet search).

Note: the Company or the Administrator may require further documentation to be provided upon written request.

School, College or University

Full name of school, college or university.

Registered office address school, college or university.

Authorised signatory list.

Verification of identity of school, college or university from relevant registers and/or from obtaining appropriate background information (e.g. via internet search).

Verification of identity of two officials or one official and one authorised signatory(If individuals, one copy proof of ID and one copy proof of address) or items listed below.

Confirmation of ownership of the entity. In particular, confirmation of public ownership or independent ownership. Where independently owned, identify all persons who own or control over 25% of the entity's share capital, profit or voting rights.

Names of main officials of school, college or university.

Note: the Company or the Administrator may require further documentation to be provided upon written request.

Jurisdictions assessed by the Administrator to operate comparable AML/CTF controls

Australia, Austria, Belgium, Bulgaria Canada, Channel Islands, Denmark, Finland, France, Germany, Greece, Hong Kong, , Iceland, Ireland, Isle of Man, Italy, Japan, Luxembourg, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom and the USA.

Representations and Warranties

I/We confirm that I am/we are 18 years of age or over and have the full right, power and authority to make the investment pursuant to this form whether this investment is my/our own name or is made on behalf of another person or institution.

I/We, having received and considered a copy of the current Prospectus, any relevant supplements thereto, the current Memorandum and Articles of Association of the Company and the most recent annual and/or semi-annual report of the Company (if any), hereby confirm and declare that this application is based solely on the information contained in such documentation and is made pursuant to the terms of this Application Form. In addition, I/We confirm that I/We have received and read the information contained in this form and confirm that a copy of the Key Investor Information Document has been supplied to me/us. I/We confirm that I/We have read the Key Investor Information Document and that any future investments to any other sub-fund or Share Class of the Company can also be transacted based on this confirmation. I/We hereby acknowledge and agree that the updated KIID for each Share Class is available at the Investment Manager's website at www.crmucits.com and that I/we will read and review the most up-to-date version of the relevant KIID prior to making any subsequent application for Shares in the Fund.

I/We agree that the issue and allotment to me/us of the Shares is subject to the provisions of the current Memorandum and Articles of Association of the Company and the Prospectus, that subscription for Shares will be governed and construed in accordance with Irish law and I/we confirm that by subscribing for Shares, I/we are not relying on any information or representation other than such as may be contained in the Memorandum and Articles of Association of the Company, the Prospectus and the most recent annual or semi-annual report (if available) thereto.

I/We hereby represent and declare that I am/we are fully informed as to: (i) the legal requirements within my/our country for the purchase of Shares and are permitted to purchase the Shares under the laws and regulations of my/our home country in the manner in which the Shares have been offered and sold to me/us; (ii) any foreign exchange restrictions applicable to me/us; and (iii) any relevant tax considerations relating to me/us arising out of my/our purchase and ownership of Shares.

I/We certify that I am /we are eligible to invest in the Company in accordance with the preceding paragraph and that I am/we are not acquiring Shares for or on behalf of, or for the benefit of, any person or entity who/which is not eligible to invest in the Company nor do I/we intend transferring any Shares which I/we may purchase to any person or entity who/which is not eligible to invest in the Company. I/We confirm that I/we are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose the entire sum invested.

I/We agree to notify the Company or the Administrator immediately if I/we become aware that any of the representations, declarations or warranties given by me/us in this Application Form is/are no longer accurate and complete in all respects and agree immediately to take such action as the Company may direct, including where appropriate, redemption of my/our entire holding.

I/We agree to indemnify the Administrator, on its own behalf and as agent of the Company and agree to keep the Company, the Investment Manager and the Administrator indemnified against any loss of any nature whatsoever (including but not limited to any and all losses, liabilities, damages, penalties, costs, fees and expenses (including without limitation legal fees and disbursements) arising to any of them as a result of any inaccuracy in or breach of any of the representation, warranty or declaration given by me/us in this Application Form.

I/We have such knowledge and experience in business and financial matters or have obtained advice from a professional adviser such that I am/we are capable of evaluating the merits, and the risks, of an investment by me/us in the Company.

I/We understand that the tax disclosure set forth in the Prospectus is of a general nature and may not cover the jurisdiction in which I am /we are subject to taxation and that the tax consequences of my/our purchase of Shares depend on my/our individual circumstances.

I/We acknowledge the right of the Company at any time to require the mandatory redemption of Shares in the circumstances provided for in the Prospectus.

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

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

I/We declare that the entity hereby subscribing for Shares is neither a Benefit Plan Investor nor investing on behalf of or with any assets of a Benefit Plan Investor as defined below. (Benefit Plan Investors should contact the Fund.) "Benefit Plan Investor" is used as defined in U.S. Department of Labor ("DOL") Regulation § 2510.3-101(f)(2), and includes (i) any employee benefit plan (as defined in Section 3(3) of the Employee Retirement Income Security Act of 1974, as amended ("ERISA")), whether or not such plan is subject to Title I of ERISA (which includes both U.S. and non-U.S. plans, plans of governmental entities as well as private employers, church plans, and certain assets held in connection with nonqualified deferred compensation plans); (ii) any plan described in Section 4975(e)(1) of the Internal Revenue Code of 1986, as amended, (the "Code") (which includes a trust described in Code Section 401(a) which forms a part of a plan, which trust or plan is exempt from tax under Code Section 501(a), a plan described in Code Section 403(a), an individual retirement account described in Code Section 408 or 408A or an individual retirement annuity described in Code Section 408(b), a medical savings account described in Code Section 220(d) and an education savings account described in Code Section 530); and (iii) any entity whose underlying assets include plan assets by reason of a plan's investment in the entity (generally because 25 per cent. or more of a class of interests in the entity is owned by plans). Benefit Plan Investors also include that portion of any insurance company's general account assets that are considered "plan assets" and (except if the entity is an investment company registered under the 1940 Act) the assets of any insurance company separate account or bank common or collective trust in which plans invest.

If I am/we are a commodity pool, my/our investment is directed by an entity which (i) is not required to be registered in any capacity with the CFTC or to be a member of the National Futures Association ("NFA"), (ii) is exempt from registration or (iii) is duly registered with the CFTC in an appropriate capacity or capacities and is a member in good standing of the NFA.

I/We understand that for so long as I/we hold Shares in the Company, I/we agree to provide all necessary details, information, documents and co-operation requested by the Company or its duly authorised delegates in order to determine beneficial ownership as defined in the Beneficial Ownership Regulations.

I/We understand that if at any time during the period that I/we hold any Shares in the Company I/we become aware that I/we am/are (a) "beneficial owner(s)" of the Company as that term is defined in the Beneficial Ownership Regulations, I/we acknowledge and agree to the following:

1. to provide such information as may be required by the Company, and if the Company or its duly appointed delegate has not contacted me/us within a month of me/us acquiring the status of a Beneficial Owner, provide the information required in the section of this Agreement titled "Details Required Pursuant to the Beneficial Ownership Regulations" within the following month, as well as (to the best of my/our knowledge) the date on which I/we became a Beneficial Owner (as required under Regulation 11 of the Beneficial Ownership Regulations);
2. where I/we become aware that a Relevant Change (as defined in the section of this Agreement titled "Details Required Pursuant to the Beneficial Ownership Regulations") has occurred and the Company or its duly appointed delegate has not contacted me/us for information on the Relevant Change within a month of its occurrence, I/we agree to notify the Company or its duly appointed delegate of the Relevant Change, the date of its occurrence and any other necessary information within either (i) two months of the Relevant Change or (ii) one month of becoming aware of facts from which I/we could reasonably conclude that a Relevant Change has occurred (whichever is later) (as required under Regulation 12 of the Beneficial Ownership Regulations).

I/We acknowledge that under Regulations 11 and 12 of the Beneficial Ownership Regulations it is a criminal offence under Irish law (punishable by a fine of up to €5,000) if, being aware of my/our status as a Beneficial Owner, I/we (i) fail to take the steps above where the Company has not contacted me/us for information within the relevant timeframes, or (ii) in purporting to do so, make a statement that is false in a material particular, knowing it to be false or being reckless as to whether it is so false

Investment Company Representations:

I/We, if not a natural person, am/are duly organised, validly existing and in good standing under the laws of the jurisdiction in which I am/we are organised and I/we have the power and authority to enter into and perform my/our obligations under this Application Form.

I am/we are able to bear the economic risk of an investment in the Shares, including, without limitation, the risk of loss of all or a part of my/our investment. I/we do not have an overall commitment to investments which are not readily marketable that is disproportionate to my/our net worth, and my/our investment in the Shares will not cause such overall commitment to be excessive.

The Administrator and the Company are each hereby authorised and instructed to accept and execute any instructions in respect of the Shares to which this application relates given by me/us either in written form, on PDF attachment by email or by facsimile. I/We hereby agree to indemnify the Company and the Administrator, on its own behalf and as agent of the Company and agree to keep the Company and the Administrator indemnified against any loss of any nature whatsoever arising as a result of the Company and/ or the Administrator acting upon PDF attachment by email or facsimile instructions. The Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.

I/We acknowledge that due to anti-money laundering requirements operating within Ireland, the Administrator or the Company (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Administrator, on its own behalf and as agent of the Company and the Company shall be held harmless and indemnified against any loss arising as a result of a failure to process the application, or a delay in processing any redemption requests, if such information requested by the Administrator or the Company has not been provided by me/us or has been provided in incomplete form.

I/We also warrant and declare that the monies being invested pursuant to this application do not represent directly or indirectly the proceeds of any criminal activity and the investment is not designed to conceal such proceeds so as to avoid prosecution for an offence or otherwise.

I/We acknowledge no redemption proceeds will be paid to me/us in respect of a redemption order (although subsequent transactions may be processed) prior to the receipt and acceptance of all relevant anti-money laundering documentation by or on behalf of the Administrator or the Company. I/We hereby hold the Company and the Administrator harmless and indemnify them against any loss arising as a result of a failure to process the redemption application if such relevant anti-money laundering documentation has not been provided by me/us.

I/We acknowledge that in circumstances in which the subscription proceeds are not received in a timely manner, the relevant allotment of Shares may be cancelled and that I/we may be required to compensate the Company for any costs and expenses thereby incurred.

I/We understand and agree that any redemption proceeds paid to me/us will only be paid to a bank account in my/our name and with a recognised financial institution.

I/We hereby accept such lesser number of Shares, if any, than may be specified above in respect of which this application may be accepted.

I/We acknowledge that pursuant to the Prospectus and the Memorandum and Articles of Association of the Company, the Directors have sole and absolute discretion to accept or reject in whole or in part any application for Shares.

In respect of joint applicants only, we direct that on the death of one of us the Shares for which we hereby apply be held in the name of and to the order of the survivor or survivors of us or the executor or administrator of the last of such survivor or survivors.

I/We understand that my/our personal information that I/we provide in my/our interactions with the Company will be collected, stored and used by the Company and its duly authorised delegates in accordance with the EU data protection regime introduced by the General Data Protection Regulation (Regulation 2016/679). I/We acknowledge that we are advised to read in detail the Privacy Notice attached at Appendix 4. This document provides an outline of my/our data protection rights and the data protection obligations of the Company and its duly authorised delegates as they relate to my/our investment in the Company.

I/We shall provide the Company and the Administrator with any information which it may reasonably request in connection with tax and or/FATCA regulations/reporting requirements and/or the OECD common reporting standard as implemented in Ireland ("CRS") or other similar requirements (including but not limited to completing the self-certification forms included in this Application Form) in order to substantiate any representations made by me/us or otherwise and I/we authorise the Company or its agents to disclose such information relating to this application to such persons as they consider appropriate.

I/We agree to provide to the Company and the Administrator at such times as each of them may request such declarations, certificates or documents as each of them may reasonably require (the "**Tax Information**") in connection with this investment

(including for the purposes of tax and/or FATCA regulations/reporting requirements and/or CRS). Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Company or the Administrator immediately of any such change and further agree to request the redemption of Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Company.

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

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

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

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

I/We hereby acknowledge that if I/we fail to provide the Tax Information and such failure results in the Company being unable to comply with the IGA, the Company and its delegate may exercise its right to completely redeem an applicant (at any time upon any or no notice). I/We further acknowledge and agree to indemnify the Company 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 Company.

I/We confirm that I/we understand that the Company, in respect of each Fund, operates a Euro collections account and a US Dollar collections account in the name of the relevant Fund through which subscription monies and redemption proceeds and dividend income (if any) for the relevant Fund are channelled. I/we further understand that these collections accounts shall not have the protection of the Central Bank Supervision and Enforcement) Act 2013 (Section 48(1)) Investor Money Regulations 2015 for Fund Service Providers, as may be amended from time to time and that a risk exists to the extent that monies are held by the Company on behalf of the relevant Fund in the collections accounts for the account of a Fund at a point where such Fund becomes insolvent. Upon receipt into the collections accounts, subscription monies, redemption proceeds or dividend income will be the property of the relevant Fund and accordingly you will be treated as a general creditor of the relevant Fund during the period such monies are held in the collections accounts.

I/We hereby acknowledge that any notice or document may be served by the Company or Administrator on me/us in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000, if I have provided an e-mail address to the Company or its delegate, consent to any such notice or document being sent to me/us electronically to the e-mail address previously identified to the Company or its delegate which I/we acknowledge constitutes effective receipt by me/us of the relevant notice or document. I/we acknowledge that I/we am/are not obliged to accept electronic communication and may at any time choose to revoke my/our agreement to receive communications electronically

by notifying the Company in writing at the above address, provided that my/our agreement to receive communications electronically shall remain in full force and effect pending receipt by the Company of written notice of such revocation.

Where I/we am/are investing as nominee, I/we shall provide our client(s) with the KIID issued in respect of the Fund and/or Share Class (as the case may be) and I/we shall ensure that we do so in compliance with Commission Regulation (EU) No. 583/2010, as amended from time to time or by any supplemental legislation and in compliance with the applicable legislation in any jurisdiction in carrying out this activity. I/We shall maintain records of my/our provision of the KIID to my/our clients and shall furnish such records to the Company, or its delegates, upon request.

I/We understand that the confirmations, representations, declarations, indemnities and warranties made or given herein are continuous and apply to all subsequent purchases of Shares by me/us in the Company.

Declaration of Residence outside of Ireland⁸

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

Declaration on own behalf

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

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

**Delete as appropriate (mandatory)*

Declaration as Intermediary

I/we* declare that I am/we are* applying for Shares on behalf of persons:
who will be beneficially entitled to the Shares; and,
who, to the best of my/our* knowledge and belief, are neither resident nor ordinarily resident in Ireland.

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

**Delete as appropriate (mandatory)*

Name and address of applicant: _____

Signature of applicant or authorised signatory : _____ (declarant)

Capacity of authorised signatory (if applicable): _____ Date: _____

Joint applicants :

Names : _____

Signatures : _____

IMPORTANT NOTES :

Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.

To be valid, the application form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.

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

"Intermediary" means a person who: carries on a business which consists of, or includes, the receipt of payments from an investment undertaking resident in Ireland on behalf of other persons, or hold units in an investment undertaking on behalf of other persons.

⁸ Only applicable to Irish domiciled fund. Client's Irish tax advisors should confirm that content mirrors the Irish Revenue's Prescribed Forms.

Declaration of Residence within Ireland⁹
Declaration referred to in Section 739D(6) Taxes Consolidation Act, 1997

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

A specified company

Entitled to exemption from income tax and capital gains tax by virtue of sections 784A(2), and 787I of the TCA 1997, (see further requirements for Qualifying Fund Manager below).

A credit union to which Section 2 of the Credit Union Act, 1997 applies.

Additional requirement where the declaration is completed on behalf of 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 applies, a qualifying management company or a credit union to which Section 2 of the Credit Union Act 1997 applies

I undertake that, in the event that the Shares cease to be assets of the *pension scheme/company carrying on life business within the meaning of section 706 TCA 1997/investment undertaking/special investment scheme/unit trust to which section 731(5) (a) TCA applies/qualifying management company/credit union to which Section 2 of the Credit Union Act 1997 applies, including a case where the Shares are transferred to another such entity, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly. (*Delete as appropriate)

Additional requirements where the declaration is completed 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 related 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 investment undertaking accordingly.

Additional requirements where the declaration is completed by a Qualifying Fund Manager

I 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, and

Are managed by the declarant for the individual named below who is beneficially entitled to the Shares.

I undertake that, if the Shares cease to be assets of the *approved retirement fund/the approved minimum retirement fund, including a case where the Shares are transferred to another such fund, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly. (* Delete as appropriate)

Additional requirements where the declaration is completed by an Intermediary

I/we* 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.

⁹ Only applicable to Irish domiciled funds. Client's Irish tax advisors should confirm that content mirrors the Irish Revenue's Prescribed Forms

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: _____

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

IMPORTANT NOTES:

This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration. Tax reference number in relation to a person, has the meaning assigned to it by Section 885 TCA 1997 in relation to a “specified person” within the meaning of that section. In the case of a charity, quote the Charity Exemption Number (CHY) as issued by Revenue. In the case of a qualifying fund manager, quote the tax reference number of the beneficial owner of the Shares. In the case of (i) an exempt pension scheme, the administrator must sign the declaration (ii) a retirement annuity contract to which Section 784 or 785 applies, the person carrying on the business of granting annuities must sign the declaration (iii) a trust scheme, the trustees must sign the declaration. In the case of a charity, the declaration must be signed by the trustees or other authorised officer of a body of persons or trust established for charitable purposes only within the meaning of Sections 207 and 208 TCA 1997. In the case of 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.

FATCA AND CRS CERTIFICATIONS

Instructions for completion

We are obliged pursuant to the Intergovernmental Agreement Between the Government of Ireland and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA, 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. 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 Fund 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 refer to the OECD CRS Portal or speak to a tax adviser.

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

If any of the information below changes in the future, please ensure that we are advised of these changes promptly.
(Mandatory fields are marked with an *)

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

Instructions for completion and Data Protection Notice

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

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

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or OECD websites at: <http://www.revenue.ie/en/business/aeoi/index.html> <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

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

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

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

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

(Mandatory fields are marked with an *)

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

***Account Holder / Controlling Person Name:** _____

***Current Residential Address:**

Number: _____ Street: _____

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

Country: _____ Email Address: _____

Mailing address (if different from above):

Number: _____ Street: _____

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

Country: _____ Email Address: _____

***Place and Date of Birth**

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

***Date of Birth:** _____

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

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

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

OR

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

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

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

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

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

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

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

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

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

Reason B – The Account Holder is otherwise unable to obtain a TIN (Please explain why you are unable to obtain a TIN)

Reason C – No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

Section 4 – Type of Controlling Person

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

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

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box	Please Tick	Entity Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		
Controlling Person of a trust – settlor		
Controlling Person of a trust – trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

***Section 5: 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.

* Authorised Signature: _____

* Print Name: _____

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

* Capacity (if Controlling Person): _____

Entity Self-Certification for FATCA and CRS

Instructions for completion and Data Protection notice.

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

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

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

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

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

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

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

(Mandatory fields are marked with an *)

***Section 1: Account Holder Identification**

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

*Country of Incorporation or Organisation: _____

*Current (Resident or Registered) Address:

Number: _____ Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

***Section 2: FATCA Declaration:**

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

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

U.S. TIN: _____

Or

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

Or

c) The Entity is a **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.

I.	<i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i>	
II.	<i>Registered Deemed Compliant Foreign Financial Institution</i>	
III.	<i>Participating Foreign Financial Institution</i>	

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

□□□□□□.□□□□□□.□□.□□□□

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

	<p>The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i></p> <p>Please provide the sponsor's name and sponsor's <i>GIIN</i>:</p> <p>Sponsor's Name: _____</p> <p>Sponsor's GIIN: □□□□□□.□□□□□□.□□.□□□□</p> <p>∞NOTE: this option is only available to Sponsored Investment Entities in Model 1 IGA jurisdictions. Sponsored Investment Entities that do not have U.S. reportable accounts are not required to register and obtain a GIIN with the IRS unless and until U.S. reportable accounts are identified</p>
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II.	<p>The Entity is an Exempt Beneficial Owner, Please tick and confirm the category of Exempt Beneficial Owner;</p> <p><input type="checkbox"/> I. Government Entity</p> <p><input type="checkbox"/> II. International Organisation</p> <p><input type="checkbox"/> III. Foreign Central Bank</p> <p><input type="checkbox"/> IV. Exempt Retirement Fund</p> <p><input type="checkbox"/> V. Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</p>
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III.	<p>The Entity is a Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the IGA Agreement)</p> <p>Indicate exemption: _____</p>	
IV.	<p>The Entity is a Non-Participating Foreign Financial Institution</p>	
V.	<p>The Entity is an Excepted Foreign Financial Institution Indicate exemption: _____</p>	
VI.	<p>The Entity is a Trustee Documented Trust.</p> <p>Please provide your Trustee's name and GIIN</p> <p>Trustee's Name: <input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/><input type="checkbox"/> _____</p>	

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

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

I.	<p>Active (NFFE)</p>	<input type="checkbox"/>
II.	<p>Passive (NFFE) (Please tick the box that applies)</p> <p>I. Passive (NFFE) with no Controlling Persons that are specified U.S Persons.</p> <p>II. Passive (NFFE) with Controlling Persons that are specified U.S Persons. (If this box is ticked, please also complete section 6.1 for each of the Controlling Person(s) of the Entity and complete an "Individual (Including Controlling Person(s) Self-certification for FATCA and CRS" form for each Controlling Person(s) as outlined in section 6.2.</p>	<input type="checkbox"/> <input type="checkbox"/>
III.	<p>Excepted (NFFE)</p>	<input type="checkbox"/>

IV.	<p>Direct Reporting (NFFE) Please provide your GIIN</p> <p>□□□□□□.□□□□□□.□□.□□□□</p>	<input type="checkbox"/>
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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 and TIN’s.

<http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>

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

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

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

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

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

- Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- Reason B** - The Account Holder is otherwise unable to obtain a TIN (*Please explain why you are unable to obtain a TIN*)

- Reason C** - No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

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

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

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

Section 6: Controlling Persons

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

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

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

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

6.1 Controlling Person(s) of the Account Holder:

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

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

I.	
II.	
III.	

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

6.2 Complete a separate “Individual (including Controlling Persons) Self-Certification for FATCA and CRS” form for each Controlling Person listed in Section 6.1.

***Section 7: Declarations and Undertakings**

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

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

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

*** Authorised Signature(s):**

***Print Name(s):**

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

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

SIGNATURE

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

Date: _____

Signed

Signatory Capacity if applicable (i.e. Director/manager)

1. _____

2. _____

3. _____

4. _____

IN THE CASE OF ALL JOINT HOLDERS – ALL HOLDERS MUST COMPLETE THIS DECLARATION

APPENDIX 1

"**CFTC Regulations – Part 4**" means part 4 of the U.S. Commodity Futures Trading Commission's regulations adopted under the U.S. commodity Exchanges Act;

"**United States**" means the United States of America, its territories and possessions, any state of the United States, and the District of Columbia.

"**U.S. person**" means:

- (i) a natural person who is a resident of the United States;
- (ii) a corporation, partnership or other entity, other than an entity organised principally for passive investment, organised under the laws of the United States and which has its principal place of business in the United States;
- (iii) an estate or trust, the income of which is subject to United States income tax regardless of the source;
- (iv) a pension plan for the employees, officers or principals of an entity organised and with its principal place of business in the United States;
- (v) an entity organised principally for passive investment such as a pool, investment company or other similar entity; provided, that units of participation in the entity held by U.S. Persons as "qualified eligible persons" (within the meaning of CFTC Regulations – Part 4, as defined above) represent in the aggregate 10% or more of the beneficial interests in the entity, unless such entity was formed principally for the purpose of investment by U.S. Persons in a commodity pool the operator of which is exempt from certain requirements of CFTC Regulations – Part 4 by virtue of its participants being non-U.S. Persons; or
- (vi) any other "U.S. Person" as such term may be defined in Regulation S under the U.S. Securities Act of 1933, as amended, or within the meaning of CFTC Regulations – Part 4;

"**U.S. Taxpayer**" includes a U.S. citizen or resident alien of the United States (as defined for U.S. federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organized in, or under the laws of, the United States or any state thereof (including the District of Columbia); 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 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. 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.

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."

APPENDIX 2

LETTER OF UNDERTAKING TO BE COMPLETED BY FINANCIAL AGENTS, NOMINEES AND INTERMEDIARIES

[On Company Letterhead of Regulated Entity]

[Date]

[Insert Name of Fund or Manager]

[Fund/Manager Address]

Northern Trust International Fund Administration Services (Ireland) Limited
George's Court
54-62 Townsend Street
Dublin 2
D02 R156
Ireland

**Re: Investors in [Insert Name of Fund]
Customer Due Diligence: Anti-Money Laundering/Counter Terrorist Financing**

Dear Sirs,

We confirm that we are a provider of financial services regulated within **[country / state]** by **[name of regulator]** and are required to undertake appropriate measures to ensure compliance with Anti-Money Laundering ('AML') and Counter Terrorist Financing ('CTF') legislation, regulations and authoritative guidance set by **[state applicable AML/CTF legislation]**. Our registration or licence number is **[state registration or licence number]**.

We confirm that we have appropriate measures in place under **[state applicable AML/CTF legislation]** to ensure compliance with AML and CTF regulations. We acknowledge that we are being relied upon by **[Insert Name of Fund or Manager]** and Northern Trust International Fund Administration Services (Ireland) Limited ('Northern Trust') as Transfer Agent appointed by **[Insert Name of Fund or Manager]** for the purposes of meeting the aforementioned Customer Due Diligence ('CDD') obligations in relation to investors in **[Insert Name of Fund]** and have not relied on another third party in meeting our CDD obligations.

On an ongoing basis, we will continue to satisfy ourselves, and will confirm to you on request, that we have proper internal controls, policies and procedures in place to combat money laundering and have adopted measures to prevent and detect the commission of the offence of financing terrorism. We confirm that all such controls, policies and procedures are current and kept up to date and that we shall provide you with access to these internal controls, policies and procedures as required.

In ensuring compliance with AML and CTF regulations:

- We hereby confirm our identification of beneficial owners and verification of the beneficial owners' identities (to the extent warranted by risk of money laundering and the financing of terrorism) such that we can be reasonably satisfied that we know who the beneficial owners are as well as the ownership and control structures.
- We undertake to retain documents and information sourced for the purposes of identification and verification of investors in **[Insert Name of Fund]** and beneficial owners and understanding the purpose and intended nature of the investment by investors in **[Insert Name of Fund]**.

- We undertake to provide copies of such documentation and information to either **[Insert Name of Fund or Manager]** or Northern Trust upon request.
- We undertake to retain such documents and information for a period of at least five years after our relationship with **[Insert Name of Fund or Manager]** has ended.
- We undertake that prior to the destruction of such documents and information, we will ensure that the relevant documents and information are provided to you, where there is a continuing relationship between investors and **[Insert Name of Fund or Manager]**.
- To the extent an investor introduced by us is a non-US bank, pursuant to the USA Patriot Act, as amended, we will obtain proof from such investor that it is not a shell bank within the meaning of the USA Patriot Act, as amended.

We hereby undertake, to the extent permitted by law, to notify you immediately of any concerns that we may have in connection with the above referenced investors in the context of AML and CTF regulations or in the event of any suspicious circumstances relating to such investors, which may come to our attention.

We also confirm that we have taken measures to ensure that investors are neither individuals nor institutions against whom sanctions have been imposed by OFAC, the EU or the United Nations. We undertake to notify you immediately of our identification of any investor as a non-Irish Politically Exposed Person or our identification of any investor as a Specially Designated National in order for you to complete Enhanced CDD appropriate to your legislation.

Yours faithfully,

For and on behalf of
[Regulated Entity]
[Capacity of signatory i.e. Director/Manager]

[APPENDIX 3]

[On Company Letterhead of Regulated Entity]

[Date]

[Insert Name of Fund or Manager]
[Fund/Manager Address]

Northern Trust International Fund Administration Services (Ireland) Limited
George's Court
54-62 Townsend Street
Dublin 2
D02 R156
Ireland

Re: [Insert Name of Subsidiary Company]
Customer Due Diligence: Anti-Money Laundering/Counter Terrorist Financing

Dear Sirs,

We confirm that **[Insert Name of Subsidiary Company]** is a wholly owned subsidiary of **[Insert Name of Parent Company]**. We confirm that **[Insert Name of Parent Company]** is a provider of financial services regulated within **[country / state]** by **[name of regulator]** and is required to undertake appropriate measures to ensure compliance with Anti-Money Laundering ('AML') and Counter Terrorist Financing ('CTF') legislation, regulations and authoritative guidance set by **[state applicable AML/CTF legislation]**. Our registration or licence number is **[state registration or licence number]**.

We confirm that we have appropriate measures in place under **[state applicable AML/CTF legislation]** to ensure compliance with AML and CTF regulations. We acknowledge that we are being relied upon by **[Insert Name of Fund or Manager]** and Northern Trust International Fund Administration Services (Ireland) Limited ('Northern Trust') as Transfer Agent appointed by **[Insert Name of Fund or Manager]** for the purposes of meeting the aforementioned Customer Due Diligence ('CDD') obligations in relation to **[Insert Name of Subsidiary Company]** and have not relied on another third party in meeting our CDD obligations.

On an ongoing basis, we will continue to satisfy ourselves, and will confirm to you on request, that we and **[Insert Name of Subsidiary Company]** have proper internal controls, policies and procedures in place to combat money laundering and have adopted measures to prevent and detect the commission of the offence of financing terrorism. We confirm that all such controls, policies and procedures are current and kept up to date and that we shall provide you with access to these internal controls, policies and procedures as required.

In ensuring compliance with AML and CTF regulations:

- We and **[Insert Name of Subsidiary Company]** hereby confirm our identification of beneficial owners and verification of the beneficial owners' identities (to the extent warranted by risk of money laundering and the financing of terrorism) such that we can be reasonably satisfied that we know who the beneficial owners are as well as the ownership and control structures.
- We and **[Insert Name of Subsidiary Company]** undertake to retain documents and information sourced for the purposes of identification and verification of beneficial owners and understanding the purpose and intended nature of investment on behalf of beneficial owners.
- We and **[Insert Name of Subsidiary Company]** undertake to provide copies of such documentation and information to either **[Insert Name of Fund or Manager]** or Northern Trust upon request.
- We and **[Insert Name of Subsidiary Company]** undertake to retain such documents and information for a period of at least five years after our relationship with **[Insert Name of Fund or Manager]** has ended.
- We and **[Insert Name of Subsidiary Company]** undertake that prior to the destruction of such documents and information, we will ensure that the relevant documents and information are provided to you, where there is a continuing relationship between **[Insert Name of Subsidiary Company]** and **[Insert Name of Fund or Manager]**.
- To the extent an investor introduced by **[Insert Name of Subsidiary Company]** is a non-US bank, pursuant to the USA Patriot Act, as amended, we will obtain proof from such investor that it is not a shell bank within the meaning of the USA Patriot Act, as amended.

We and **[Insert Name of Subsidiary Company]** hereby undertake, to the extent permitted by law, to notify you immediately of any concerns that we may have in connection with the above referenced beneficial owners in the context of AML and CTF regulations or in the event of any suspicious circumstances relating to such beneficial owners, which may come to our attention.

We and **[Insert Name of Subsidiary Company]** also confirm that we have taken measures to ensure that beneficial owners are neither individuals nor institutions against whom sanctions have been imposed by OFAC, the EU or the United Nations. We and **[Insert Name of Subsidiary Company]** undertake to notify you immediately of our identification of any beneficial owner as a non-Irish Politically Exposed Person or our identification of any beneficial owner as a Specially Designated National in order for you to complete Enhanced CDD appropriate to your legislation.

Yours faithfully,

For and on behalf of
[Regulated Entity]
[Capacity of signatory i.e. Director/Manager]

APPENDIX 4

Data Protection Notice

This notice sets out how Cramer Rosenthal McGlynn UCITS plc (the "Fund") will process personal information (as a Data Controller) and outlines the Fund's data protection obligations and your data protection rights as they relate to your investment in the Fund under the EU data protection regime introduced by the General Data Protection Regulation (Regulation 2016/679, the "General Data Protection Regulation")

Where your details are provided to the Fund as a consequence of your investment in the Fund and your associated interactions with the Fund (including the initial or subsequent application for shares, and including the recording of electronic communications or phone calls where applicable) or by virtue of you otherwise providing the Fund with personal information then the Fund, acting as a data controller may itself (or through a third party such as Northern Trust International Fund Administration Services (Ireland) Limited (the "**Administrator**") acting in its capacity as the Fund's administrator) process your personal information or that of individuals connected with you as an investor (for example directors, officers, employees, representatives, shareholders, investors, clients, beneficial owners or agents). Personal information includes, but is not restricted to, data such as your name, residential address, email address, place of birth, date of birth, bank account details and details relating to your investment activity. In connection with this, please note the following:

Purposes of Processing and Legal basis for processing

Your personal data may be processed by the Fund or the Administrator (or each of their affiliates, agents, employees, delegates or sub-contractors) for the following purposes:

- to facilitate the opening of your account with the Fund, the management and administration of your holdings in the Fund and any related account on an on-going basis (the "**Services**") which are necessary for the performance of your contract with the Fund, including without limitation the processing and verification of instructions including redemption, conversion, transfer and additional subscription requests and the payment of distributions;
- in order to carry out anti-money laundering ("**AML**") checks and related actions which the Fund considers appropriate to meet any legal obligations imposed on the Fund, where necessary for performance of a task carried out in the public interest or to pursue the Fund's legitimate interests in relation to, the investigation, detection, prevention and prosecution of crime including fraud, money laundering, terrorist financing, bribery, corruption, tax evasion; and to prevent the provision of financial and other services to persons who may be subject to economic or trade sanctions, on an on-going basis, in accordance with the Fund and the Administrator's AML procedures;
- to report tax related information to tax authorities in order to comply with a legal obligation;
- to enforce or defend the Fund 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 Fund or to pursue the Fund's legitimate interests;
- to disclose information to other third parties such as service providers of the Fund, auditors, regulatory authorities and technology providers in order to comply with any legal obligation imposed on the Fund or in order to pursue the legitimate interests of the Fund;

- to monitor and record calls for quality control, business and statistical analysis, training and related purposes in order to pursue the legitimate interests of the Fund to improve its service delivery;
- to update and maintain records and fee calculation as necessary to the performance of your contract;
- where the processing is in the public interest;
- to retain AML and other records of individuals to assist with the subsequent screening of them by the Administrator to comply with a legal obligation;
- where this is necessary for the purposes of the legitimate interests of the Fund or a third party and such legitimate interests are not overridden by your interests, fundamental rights or freedoms which may include for direct marketing purposes. It is noted that the General Data Protection Regulation states that the use of personal data for direct marketing purposes (that is, providing you with information on products and services that may be of interest) may be regarded as being for the purposes of a legitimate interest.

Additionally, Northern Trust International Fund Administration Services (Ireland) Limited, as the Fund's administrator, have indicated that they may use your personal data where this is necessary for compliance with a legal obligation to which they are subject.

Should we wish to use your personal data for other specific purposes (including, if applicable, any purpose that requires your consent), we will contact you.

Recipients of Data and International Transfer of Data

The Fund may disclose your personal information as follows:

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

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 European Economic Area (EEA) in accordance with the requirements of the General Data Protection Regulation. Such countries may not have the same data protection laws as your jurisdiction. Any transmission of personal information by the Fund or its delegates outside the EEA shall be in accordance with the conditions in the General Data Protection Regulation.

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

Retention period

The Fund and its duly authorised delegates may retain your personal information for a period of up to seven years following your disinvestment from the Fund or the point where your business relationship with us has ceased. Thereafter, we and our duly authorised affiliates and delegates will refrain from collecting any further personal data on you and shall take appropriate steps to dispose of any records containing your personal data, to the extent this is operationally feasible and proportionate.

Data Subject Rights

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

- Right to access your personal information (in an easily readable form).
- 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). Please note that the right for your data to be erased (the "right to be forgotten") that applies in some contexts under the General Data Protection Regulation is not likely to be applicable to most, if not all, of the personal data you provide to the Fund, given the specific nature of the purposes for which the Fund uses the data, as described above.
- Right to object to processing of your personal information (in certain specific circumstances).
- Right to data portability (in certain specific circumstances)
- Right to withdraw consent (in certain specific circumstances)
- Right to receive information regarding any entities we disclose your data to.

Where the Fund or the Administrator requires your personal information to comply with AML or other legal requirements, failure to provide this information means the Fund may not be able to accept you as an investor in the Fund.

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

You have the right to lodge a complaint with the Office of the Data Protection Commissioner (the Fund's supervisory authority) if you consider that the processing of personal data relating to you carried out by the Fund or its service providers infringes the General Data Protection Regulation.

How to contact us

As the Fund does not process personal data on a large scale, we are not required to designate a data protection officer. However, should you have any queries or wish to discuss your data protection rights with us, please contact Steven J. Gaeta, at Cramer Rosenthal McGlynn, LLC, Ph: +1 212 326 5339 E-mail: SGaeta@CRMLLC.COM.