

# Corporate/Institutional Investors Account Opening Form

Fundsmith SICAV

## Fundsmith SICAV Application Form

Please complete this Form in **BLOCK CAPITALS** and return it by email or by post to Northern Trust Global Services SE. (the "Administrator") at the address set out below.

If you have any questions regarding the completion of this Form, please contact the Administrator by:

**Email:** fundsmith-ta-lux@ntrs.com

**Phone:** +352 28 294 136

**Post:** c/o Northern Trust Global Services SE  
10 rue du Château d'Eau  
L-3364  
Leudelange  
Grand Duchy of Luxembourg

### Important information

Shares in the fund may not be sold or otherwise transferred to, or be held by, U.S. persons as defined in the Prospectus, a copy of this can be found on our website [www.fundsmith.eu](http://www.fundsmith.eu).

In order to avoid delays in the account opening process, **please ensure all sections are completed**, that the form is signed by all investors and supporting documentation is provided as described in Appendix 1 and Appendix 2.

Please also ensure telephone number(s) and email address(es) are clearly completed so we are able to contact you if required.

Please note that we do not accept digitally signed documents, except through DocuSign. Please either send a wet ink signed application form or use the DocuSign platform and attach the certificate.

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## Section 1 - Investor Information

### 1.1 General details

Legal entity name (full designation, please)

Registered address of the entity

Postcode

Country

Account designation

Country of Incorporation

Date of Incorporation

Legal form of the company

Type of business activity

Tax Identification number (if applicable):

What is the business object of the investor?

Will dealing instructions be sent via swift?

YES

NO

If YES, please indicate the swift code used

Will dealing instructions be sent via email?\*

YES

NO

If YES, please indicate the email address used

**\*Please note that deal instructions received by email will only be accepted from the above email address. Instructions received from any other email address will not be processed.**

Legal representative(s) and/or contact person(s) entitled to open/act on the account and/or place deals:

#### Representative 1

Title

Surname

Forename(s)

Place of birth

D.O.B.

/

/

Nationality

National identity number

Residential address

Postcode

Telephone number

Email address

Business address

Postcode

**Section 1 - Investor Information continued**

Representative 2		
Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number	
Residential address		
		Postcode
Telephone number	Email address	
Business address		
		Postcode
<p>All communications will be sent to the business address of the entity. If this Application Form is signed by an attorney or other agent, the original or a certified copy of the authority of the attorney or agent must accompany this Application Form. A corporation should execute under its common seal or sign by a duly authorized officer who should state his representative capacity.</p>		
Additional Recipient of Statements		
Title	Surname	Forename(s)
Postal address		
		Postcode
Telephone number	Fax number	
Email address		
PFIC Statements		
If you want to receive PFIC statements please tick this box . <input type="checkbox"/>		

1.2 Entity type
<p>Please tick the relevant box below (entity type) and complete the information for the specific entity type in section 1.4, and, if applicable, 1.5, or 1.6, or 1.7, depending on your answers (please find additional guidance in Appendix 1 of this Application Form)</p> <p><input type="checkbox"/> <b>Financial Institution, Nominee Company, Collective Investment Scheme ('CIS'), Pension Scheme</b> (regulated only, including Trust Pension Schemes) and <b>any other financial company</b> (i.e. Central Bank, Insurance, etc.)</p> <p><input type="checkbox"/> <b>Commercial Company</b> (Listed or not on a Regulated Market*), <b>LLC, Partnership Foundation</b> (or similar entity), <b>Club/Society, Association/Trade Union, Public body, Non regulated Pension Scheme</b> (other than Trust), <b>Charity, Church, School/University, other</b></p> <p><input type="checkbox"/> <b>Trust</b> (patrimonial, non-regulated Trust Pension Scheme)</p>

**Section 1 - Investor Information continued**

**1.3 Nature and intended purpose of the business relationship with the Fund**

Please tick the boxes below where relevant.

- |  |  |
|--|--|
| <input type="checkbox"/> Distribution of units and shares to own clients | <input type="checkbox"/> Wrapping unit-linked products         |
| <input type="checkbox"/> Market Maker                                    | <input type="checkbox"/> Nominee                               |
| <input type="checkbox"/> Platform for transmitting orders                | <input type="checkbox"/> Client Investment for diversification |
| <input type="checkbox"/> Others  | <input type="text" value="Please specify"/>                    |

**1.4 Regulated status\***

**A. Listing on a Regulated Market\***

\* Regulated Market: As defined under Directive 2014/65/EU of the European Parliament and of the Council of 15 May 2014 on markets in financial instruments ("MiFID II").

Are you listed on a Regulated Market\*? YES  NO

If you are listed, please indicate the name of the stock exchange

**B. Regulated Entity**

Within the meaning of compliance, anti-money laundering and anti-terrorism financing perspectives as per FATF Recommendations on International Standards on Combatting Money Laundering and the Financing of Terrorism & Proliferation?

**Yes**, we are directly regulated for AML-CTF purpose (please provide a proof of regulation)

Name of our regulator

Type of our business license

**No**, but we are fully owned and controlled by a regulated financial institution

Legal entity name of our parent company

Percentage of ownership

Place of incorporation of our parent company

Name of the regulator of our parent company (please provide a proof of regulation)

**None of the above.** We are not regulated and we do not have a regulated parent company. If selected, please complete the following sections, as relevant to your entity type.

**Section 1 - Investor Information continued**

**1.5 Commercial Company, Foundation, Club, Association, Party, Government, other**

Does the Entity have its own legal personality (not a shelter foundation)? YES  NO

The legal form of the Entity is

The Entity is incorporated in (specify country)

**1.6 State agency, Government, Public Administrations or Enterprises**

Does the Entity have its own legal personality (not a shelter foundation)? YES  NO

Name of the governance committee or equivalent overseeing the activities of the agency (if applicable)

Type of Relationship with the State

**1.7 Trust (excluding Regulated Pension Schemes)**

The Trust is governed by the laws of

The Trust is revocable YES  NO

Legal form of the Trust is

**The Trustee(s) is (are)**

Title

Surname

Forename(s)

Legal form

Place of birth/incorporation

D.O.B.   /   /

Nationality

National identity number

Residential address/registered address

Postcode

Principle place of business (if different from registered address)

Postcode

Trustee is supervised and regulated by



**Section 1 - Investor Information continued**

**1.7 Trust (excluding Regulated Pension Schemes) continued**

**The Settlor(s) / Grantor(s) is/(are)**

Title  Surname  Forename(s)

Legal form

Place of birth/incorporation  D.O.B.    /    /

Nationality  National identity number (where appropriate)

Residential address/registered address

Postcode

Principle place of business (if different from registered address)

Postcode

**The Protector is (are)**

- There is no protector  
 If there is a protector. Please provide details in a separate sheet.

**1.8 Relationship: "acting on our own behalf" or "on behalf of a third party"**

Please tick the relevant boxes.

- A.**  We hereby certify that we are acting **on our own behalf** (investing our own money)

If this option does not apply, please complete the section B including (i) and (ii) which follow.

**B. We are acting on behalf of a third party**

- We are acting on behalf of a third party and commit to provide the information below as well as, upon request, the AML/KYC identification and verification data and other relevant documentation on the identity of the underlying investors and their beneficial owners without delay.

We also confirm that we undertake to verify the identity of all third parties on whose behalf we act in the Fund.

(i) We specify the profile of the investors we provide our service to as follows:

- |   |  |
|---|--|
| <input type="checkbox"/> Retail investors     | <input type="checkbox"/> High Net Worth Individuals and family offices |
| <input type="checkbox"/> Commercial companies | <input type="checkbox"/> Insurance companies                           |
| <input type="checkbox"/> Investment fund      | <input type="checkbox"/> Pension Schemes and plans                     |
| <input type="checkbox"/> Others               |  |

Our approximate number of clients is  as of    /    /

(ii) We offer the Fund's shares to customers from/in countries identified as jurisdictions with AML-CTF strategic deficiencies:

N/A  Yes  Please list those jurisdictions with AML-CTF strategic deficiencies here

**Section 1 - Investor Information continued**

**1.9 Identification of the directors or equivalent**

Please provide the following information concerning your executive and non-executive directors, or any person exercising a similar position

**Director 1**

Title	Surname	Forename(s)
Legal form		
Place of birth/incorporation	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address/registered address		
	Postcode	
Principle place of business (if different from registered address)		
	Postcode	

**Director 2**

Title	Surname	Forename(s)
Legal form		
Place of birth/incorporation	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address/registered address		
	Postcode	
Principle place of business (if different from registered address)		
	Postcode	

**Director 3**

Title	Surname	Forename(s)
Legal form		
Place of birth/incorporation	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address/registered address		
	Postcode	
Principle place of business (if different from registered address)		
	Postcode	

**Section 1 - Investor Information continued**

**1.10 Identification of the Ultimate Beneficial Owners**

Please make sure you tick this box:

We commit to communicate any subsequent change of Ultimate Beneficial Ownership to the Administrator without any delay.

**Please complete below where relevant**

In accordance with Article 1(7) of the Luxembourg Law of 12 November 2004<sup>1</sup>, please follow Steps A, B & C in order to determine the ultimate beneficial ownership of your structure. If you are acting on behalf of a third party, Step D will also be required:

**A. Identify the natural person(s) who directly or indirectly holds or controls more than 25% of the shares, voting rights or ownership in your entity:**

A

Is/are there any natural person(s) who directly or indirectly holds or controls more than 25%, of the shares, voting rights or ownership in an entity;

Yes  No

If the response is yes, please complete the following table. If the response is no, please go to B. below.

**Beneficial Owner 1**

Title	Surname	Forename(s)			
Place of birth				D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality		National identity number (where appropriate)			
Residential address					
				Postcode	

**Beneficial Owner 2**

Title	Surname	Forename(s)			
Place of birth				D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality		National identity number (where appropriate)			
Residential address					
				Postcode	

**Beneficial Owner 3**

Title	Surname	Forename(s)			
Place of birth				D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality		National identity number (where appropriate)			
Residential address					
				Postcode	

<sup>1</sup> Law of 12 November 2004 on the fight against money laundering and terrorist financing (amended): [https://www.cssf.lu/wp-content/uploads/RCSSF\\_No12-02eng.pdf](https://www.cssf.lu/wp-content/uploads/RCSSF_No12-02eng.pdf)

**Section 1 - Investor Information continued**

**B. Where no natural person can be identified under A., please complete the following table to identify any person who controls the legal entity via other means;**

**B**

**Person who controls the legal entity via other means 1**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Person who controls the legal entity via other means 2**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Person who controls the legal entity via other means 3**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Section 1 - Investor Information continued**

**C. Where no person under points A. and B. above is identified, identify any person who holds the position of senior managing official.**

C

**Senior managing official 1**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Senior managing official 2**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Senior managing official 3**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Section 1 - Investor Information continued**

**D. If you are acting on behalf of a 3rd party please also complete the following:**

**D**

- We do not have any underlying investor owning more than 25%\* of the shares of this account through us.
- We have one or more underlying investor(s) owning more than 25%\* of the shares of this account through us whose details are provided in the table hereunder.

\*Please note that in some cases a threshold of 10% may apply.

**Third party 1**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Third party 2**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Third party 3**

Title	Surname	Forename(s)
Place of birth	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Nationality	National identity number (where appropriate)	
Residential address		
		Postcode

**Section 1 - Investor Information continued**

**1.11 Identification of the chain of ownership (multilayer structure)**

**Is your legal entity a multilayer structure?**

Yes (If **YES**, please continue onto the following documentary request).  No

We attach the most up to date, signed and dated multilayer structure chart including percentage of shareholding/control for each entity in the structure.

**Is there any chain of ownership between the investor and the Ultimate Beneficial Owner?**

Yes  No

If the answer is YES, please complete the following table for each of the legal entities.

**Layer 1**

Denomination

Legal form

Registered address

Postcode

If different, place of business address

Postcode

Official national identity number (where appropriate)

**Executive and non-executive directors or persons exercising similar positions (for the legal arrangements).**

First name	Last name	Residential address	Tax residential address	Place of birth	Date of birth	Official National ID Number (where appropriate)	Profession/ Occupation

**Section 1 - Investor Information continued**

**1.12 Identification of other signatories (if any)**

Please provide the following information concerning the signatories of your entity, who are or will be involved in the business relationship with the Administrator

First name	Last name	Residential address	Tax residential address	Place of birth	Date of birth	Official National ID Number (where appropriate)	Profession/ Occupation

**1.13 Identification of other related parties (if applicable)**

Please confirm if there is any third-party legal entity, which acts on behalf of your entity during the business relationship with the Administrator, who are or will be involved in the business relationship with the Administrator.

Yes  No

If the above answer is YES, please complete the table(s) below.

**Third party entity**

Denomination	
Legal form	
Registered address	
	Postcode
If different, place of business address	
	Postcode
Official national identity number (where appropriate)	

**Executive and non-executive directors or persons exercising similar positions (for the legal arrangements).**

First name	Last name	Residential address	Tax residential address	Place of birth	Date of birth	Official National ID Number (where appropriate)	Profession/ Occupation



**Section 1 - Investor Information continued**

**1.14 Source of funding and wealth**

Source of Funds: According to the Circular CSSF 21/782 Source of funds' means the origin of the funds involved in a business relationship or occasional transaction. It includes both the activity that generated the funds used in the business relationship as well as the means through which the customer's funds were transferred.

Please note that no third party payment is accepted.

Please indicate the origin/source of the money you are investing by ticking the applicable box(es) below (proof of evidence may be required).

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Profit from sale of business                 | <input type="checkbox"/> Profit from sale of investment | <input type="checkbox"/> Client's money                 |
| <input type="checkbox"/> Investment income (e.g. dividends, interest) | <input type="checkbox"/> Profit from sale of property   | <input type="checkbox"/> Employee Pension Contributions |
| <input type="checkbox"/> Loan   | <input type="checkbox"/> Others                         | <input type="text" value="Please specify"/>             |

**Source of Wealth:**

According to the Circular CSSF 21/782, means the origin of the customer's total wealth.

Total balance sheet / Total assets of the last 3 years

Profit and losses of the last 3 years

Please provide details on how your overall wealth was accumulated

**1.15 Investment details**

Please indicate below the expected level of investment. Please note you will only be able to place deals once your application has been accepted. To place a deal please complete the Deal Instruction Form or send an instruction via the agreed SWIFT service.

**1.15.1 Expected level of investment**

Expected amount of initial investment

Expected amount of investment per annum

**1.15.2 Distributions**

If you have opted for Income Shares (as defined in the Prospectus), please select how you would like us to deal with any distributions.

Reinvest

Cash distribution will be paid to the bank account details provided in section 3.2 below.

Cash

## Section 2 - Agent

### 2.1 Agent details

If you are acting on behalf of the institutional investor please complete this section.

Agent name

Address

Postcode

Country

Title

Surname

Forename(s)

Telephone number

Email address

Note that this document legally binds the entity for all further registers with a different designation.

### 2.2 Agent Declaration

Name (please print in full)

**Signature**

**Date**

Name (please print in full)

**Signature**

**Date**

## Section 3 - Investment and Payment Details

### 3.1 Investor - Payment details for your investment and redemption facility

Please provide the following information about the bank or financial institution at which you hold an account in your name and from which you are remitting subscription monies. This information will be used by the Fund or its agents to pay any proceeds. Please notify the Administrator if your bank account information changes.

Payments will be paid only to registered shareholders (no third party payment can be executed) and made by electronic bank transfer (in shared mode for charges).





#### Beneficiary bank





#### Correspondent bank of the Beneficiary bank (if relevant):





### 3.2 Investor - Distribution (Dividends) Payment details

Please indicate below where income should be paid, if different from the account indicated in the above section.





#### Beneficiary bank





#### Correspondent Bank of the Beneficiary Bank (if relevant):

## Section 4 - Tax information and declarations

### 4.1 Tax information

The Applicant(s) acknowledge(s) that it/he/she/they has/have obtained their own independent advice on the taxation consequences of investing in the Fund and that the Applicant(s) has/have not received any tax or legal advice regarding investment in the Fund from the Fund or the Administrator and that this investment is the result of its/his/her/their own decision.

The Applicant(s) agree(s) that if it/he/she/they is/are subject to tax in another country or jurisdiction (or the Fund or its agents have reason to believe or are required to assume that this may be the case), the Fund and its agents may be required by legislation, regulation or by agreement with tax authorities of that country to report on an ongoing basis certain information about you and your accounts and assets you hold with the Fund and its agents on an individual or aggregated basis to a relevant tax authority which then pass that information to the tax authorities where you are subject to tax or directly to the tax authorities in that country. The Fund and/or its may also have to report information about your direct and indirect shareholders or other owners or interest holders and, if you are a trust, your beneficiaries, settlors or trustees.

If the Fund or its agents are required to report information about you, this would include (but is not limited to) information about you, your accounts and assets, for example your account number(s), the amounts of payments including interest paid or credited to the account(s), the account balance(s) or asset values, your name, address and country of residence and your social security number/taxpayer identification number or similar (if applicable). You may need to provide us with further information, if requested, about your identity and status.

**Investors who have one or more of the following characteristics need to provide us with a US tax form:**

- **An investor who is a US person**
- **An investor with any US indications, such as a US address or US telephone number**
- **A company or trust**

We recommend you seek advice from your own Tax adviser as to which is the most appropriate US Tax form for you to complete. In certain circumstances the information which you provide on your US tax form may mean that further documentation will be required.

Copies of the US tax forms can be found on the IRS website: <http://www.irs.gov/pub/irs-pdf/fw8ben.pdf> or <http://www.irs.gov/pub/irs-pdf/fw9.pdf>

### 4.2 Tax status

The Applicant is:

- a distributor investing for undisclosed clients through an omnibus/custody account (proceed to section 4.2.2 Tax status of Beneficial Owner)
- investing on behalf of a third party as a: Nominee | Trustee | Partner | Agent | Other (proceed to section 4.2.1 Tax status of Applicant investing on behalf of third party)

#### 4.2.1 Tax status of Applicant investing on behalf of third party

Name

Third party investor type (corporate, pension fund, etc.)

Tax Identification Number (TIN)

#### 4.2.2 Tax status of Beneficial Owner

Name of Beneficiary

Main Tax Residency

Tax Identification Number (TIN)

**Section 4 - Tax information and declarations continued**

**4.3 Classification for FATCA purposes**

To be completed only if the account holder is a corporate entity

**4.3.1 Entities with their own Global Intermediary Identification Number (GIIN)**

GIIN

FATCA Classification (please tick where accurate):

- Participating Foreign Financial Institution
- Registered Deemed Compliant Foreign Financial Institution
- Direct Reporting NFFE
- Reporting Foreign Financial Institution under IGA Model 1
- Reporting Foreign, Financial Institution under IGA Model 2

**4.3.2 Entities using a Sponsor's Global Intermediary Identification Number (GIIN)**

Sponsor's GIIN

Sponsor organisation

- Sponsored Investment Entity or Controlled Foreign Corporation
- Sponsored Direct Reporting NFFE
- Sponsored closely held Investment Vehicle

**4.3.3 Entities without a Global Intermediary Identification Number (GIIN)**

- A Certified Deemed-Compliant Financial Institution under IGA Model 2
- Non-Reporting Financial Institution under IGA Model 1
- An exempt Beneficial Owner
- A territory Financial Institution
- A Non-Participating Foreign Financial Institution
- An Active NFE
- A Passive NFFE

**Section 4 - Tax information and declarations continued**

**4.4 Classification for CRS purposes**

Section to be completed only if the account holder is a corporate entity.

**4.4.1 Financial Institution (FI)**

- Investment Entity with tax residence in non-participating jurisdiction and managed by another FI
- Other Investment Entity
- Financial Institution other than above Investment Entity (Depository institution, Custodial institution, Specific insurance company)
- Financial Institution Non Reporting according to your local jurisdiction legislation where you are resident

**4.4.2 Non-Financial Entity (NFE)**

- Active Non-Financial Entity. Corporation that is regularly traded or an affiliate of such corporation
- Active Non-Financial Entity – Government Entity or Central Bank
- Active Non-Financial Entity – International Organisation
- Active Non-Financial Entity other than above Active Non-Financial Entity classifications
- Passive Non-Financial Entity\*

\* Passive Non-Financial (Foreign) Entities as indicated under FATCA or CRS classification above

If the Entity is a Passive Non-Financial (Foreign) Entity or an Investment Entity with tax residence in non-participating jurisdiction and managed by another FI, please provide details of any Controlling Persons by completing the section “4.5 Controlling Person Self-Certification Form for FATCA and CRS” below. The term Controlling Persons is to be interpreted in a manner consistent with the recommendations of the Financial Action Task Force. If there are no natural person(s) who exercise control of the organisation, then the Controlling Person(s) will be the natural person(s) who hold the position of senior managing official in the organisation.

**4.5 Controlling Person Self-Certification Form for FATCA and CRS**

**4.5.1 Controlling Person Identification (please refer to the glossary in the Appendix 2)**

Title	Surname	Forename(s)
Place of birth		D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Nationality		National identity number (where appropriate)
Residential address		
		Postcode
Mailing address if different		
		Postcode

**4.5.2. FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes\***

Please tick and complete as appropriate.

- 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

US TIN

OR

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

**Section 4 - Tax information and declarations continued**
**4.5.3 CRS Declaration of Tax Residence (please note you may choose more than one country)**

Please indicate all countries of Tax Residence and associated Tax Identification Numbers.

Country of Tax Residence	Tax ID Number <sup>(1)</sup>

<sup>(1)</sup> Provision of a Tax ID number (TIN) is required unless you are tax resident in a Jurisdiction that does not issue a (TIN).

If you do not have a Tax identification number please explain why

**4.5.4 Type of Controlling Person (to be completed by any individual who is a Controlling Person of an Entity)**

For Joint or multiple Controlling Person's please use a separate Self Certification Form for each Controlling Person (please refer to the glossary)

Please provide the Controlling Person's Status by ticking the appropriate box	Please tick	Entity name
a. Controlling Person of a legal person – control by ownership	<input type="checkbox"/>	
b. Controlling Person of a legal person – control by other means	<input type="checkbox"/>	
c. Controlling Person of a legal person – senior managing official	<input type="checkbox"/>	
d. Controlling Person of a trust - settlor	<input type="checkbox"/>	
e. Controlling Person of a trust – trustee	<input type="checkbox"/>	
f. Controlling Person of a trust – protector	<input type="checkbox"/>	
g. Controlling Person of a trust – beneficiary	<input type="checkbox"/>	
h. Controlling Person of a trust – other	<input type="checkbox"/>	
i. Controlling Person of a legal arrangement (non-trust) – settlor-equivalent	<input type="checkbox"/>	
j. Controlling Person of a legal arrangement (non-trust) – trustee-equivalent	<input type="checkbox"/>	
k. Controlling Person of a legal arrangement (non-trust) – protector-equivalent	<input type="checkbox"/>	
l. Controlling Person of a legal arrangement (non-trust) – beneficiary-equivalent	<input type="checkbox"/>	
m. Controlling Person of a legal arrangement (non-trust) – other-equivalent	<input type="checkbox"/>	

**Section 4 - Tax information and declarations continued****4.6 Declaration and Undertakings**

I/We declare that the information provided in this Self Certification Form is, to the best of my/our knowledge and belief, accurate and complete. I/We undertake to advise the recipient within 30 days and provide an updated Self Certification Form, where any change in circumstances occurs, which causes any of the information contained in this Self Certification Form to be incorrect. I/We acknowledge that the information, data disclosed in this Self-Certification Form may be disclosed to the Luxembourg tax authorities or any other authorised delegates under Luxembourg law for tax purposes.



## Section 5 - Declarations and legal information

### 5.1 Documentation up to date

I/We hereby declare that I/We will provide the Administrator with all the required documentation upon structural changes or any other changes affecting the information provided in the sections above & below. In some cases, I/We will be required to supply originals or certified true copies of documents (as per the certification rules in Appendix 1).

### 5.2 Politically Exposed Persons

#### No Politically Exposed Persons (PEP)

Neither the legal representatives nor the beneficial owner(s), partner, associate or member is/are (a) person(s) who is/are or has/have been entrusted with prominent public functions and/or an immediate family member(s) or person(s) known to be close associates, of such persons entrusted with prominent public functions.

#### Politically Exposed Persons (PEP)

Our entity is owned, controlled or represented by the following PEP(s) directly or indirectly (in upper chain of ownership entities):

First name	Last name	Address	Date of birth	Place of birth	Nationality	Public role

**Note:** Article 1(11) of the 2004 Law provides for the following definition: “Family members” shall, in accordance with paragraph 9, mean all physical persons, including in particular: (a) the spouse; (b) any partner considered by national law as equivalent to the spouse; (c) the children and their spouses, or partners “considered by national law as equivalent to a spouse”; (d) the parents; (e) the brothers and sisters.”

### 5.3 Restrictions on share classes

If I/We subscribe into a Fund’s share class administered by the Administrator, I/We certify that I/We have checked the eligibility of any underlying investor on behalf of whom I/We act before subscribing in any given share class.

We also confirm that we will notify without undue delay the Administrator should any underlying investor on behalf of whom we subscribe cease to be eligible to hold any given share class.

For investments into the I share class I/We certify the underlying investor is defined as an Institutional Investor as these terms are accepted in Luxembourg for the purposes of Article 174 of the UCI law.

**Section 5 - Declarations and legal information continued**

**5.4 Screening and identification of employees**

- We hereby certify that the identity of our employees is verified and screened against sanction lists issued by the relevant Authorities (such as the ones administered by the European Union, the United Nations and the United States Department of the Treasury - Office of Foreign Assets Control).
- We do not perform identification and screening on our employees

We, the MLRO or the Senior Management confirm that the above statements are true and complete.

Name (please print in full)

**Signature**

**Date**

Name (please print in full)

**Signature**

**Date**

**5.5 KIID (Key Investor Information Document)**

The Applicant(s) understand(s) that the KIID is a pre-contractual document that contains key information to help him/her/it/them to understand the nature and the risks of the investment and that he/she/it/they must receive a copy thereof to make an informed investment decision before investing in the relevant class of shares of the Fund.

I/we hereby confirm by signing this form that I/we have read and understood the latest version of the KIID corresponding to my/our investment and hereby consent to the provision of the KIID on an ongoing basis through the website [www.fundsmith.eu](http://www.fundsmith.eu)

**5.6 Applicable law and Jurisdiction**

This Application Form shall be enforced, governed and construed in all respects in accordance with the laws of the Grand-Duchy of Luxembourg. Any dispute, controversy or claim arising out of or relating to this Application Form shall be submitted to the jurisdiction of the courts of the district of Luxembourg-City.

**Section 5 - Declarations and legal information continued****5.7 Acknowledgement and Declarations**

The Applicant(s) acknowledge(s) that the details set out above are true and correct and the investment in the Fund reflects its/his/her/their wishes accurately.

The Applicant(s) hereby declare(s) that (i) the Fund's shares are not being acquired in violation of any applicable law or regulation in the jurisdiction in which the Applicant(s) is/are resident or domiciled, (ii) the Applicant(s) is/are fully informed as to the tax consequences of acquiring, owning and redeeming the Fund's shares in the jurisdiction in which the Applicant(s) is/are resident or domiciled and (iii) the Fund's shares will not be owned beneficially by a person under 18 years of age.

The Applicant(s) declare(s) that it/he/she/they is/are not a United States Person and it/he/she/they is/are not acquiring shares for the account or benefit of any United States Person or with a view to their offer, sale, transfer or delivery, directly or indirectly, in the United States or to or for the benefit of any United States Person (as such a term is defined in the Prospectus).

The Applicant(s) understand(s) that income received and redemptions paid will only be made to the registered shareholders(s).

The Applicant(s) accept(s) that no third party payments will be made.

The Applicant(s) acknowledge(s) that the Fund, the Investment Manager, the Depositary and the Administrator (as defined in the Prospectus) shall be held harmless and indemnified against any loss arising as a result of any acquisition by the Applicant(s) of the Fund's shares in violation of any applicable law or regulation in the jurisdiction in which the Applicant(s) is/are resident or domiciled.

The Applicant(s) acknowledge(s) that due to legislation aimed at combating money laundering and terrorist financing in force in Luxembourg, the Administrator will require proof of identity before this application can be processed. The Applicant(s) has/have read and understood the provisions in this Application Form entitled 'Anti-Money Laundering (AML) and Terrorist Financing Prevention and provided the required information and documentation to the Administrator. The Applicant(s) understand(s) that failure to provide requested documentation may result in the withholding of redemption proceeds.

The Applicant(s) declare(s) that he/she/they will provide the Fund with any documentation, information, waivers and certifications that the Fund may request concerning or relating to (a) sections 1471 to 1474 of the Internal Revenue Code of 1986 (the 'Code'), as amended, or any associated regulations or other official guidance, (b) any treaty, law, regulation or other official guidance enacted in any other jurisdiction, or relating to an intergovernmental agreement between the United States of America and any other jurisdiction which (in either case) facilitates the implementation of paragraph (a); or (c) any agreement pursuant to the implementation of paragraph (a) or (b) above with the US Internal Revenue Service, the US government or any governmental or taxation authority in any other jurisdiction (collectively 'FATCA').

The Applicant(s) will notify the Fund within 30 days of the occurrence of any change in circumstances that causes any documentation, information, waiver or certifications provided by the undersigned pursuant to the preceding sentence to be incorrect, obsolete or invalid and (ii) promptly provide corrected information and execute and deliver updated and valid documentation, waivers and certifications upon the occurrence of any change in circumstances described in clause (i) hereof.

The Applicant(s) hereby give(s) the Fund and the Administrator, acting in its capacity as Administrator of the Fund, the instruction to provide the Fund with their shareholding positions in the Fund together with their complete name and details on a regular basis. The Applicant(s) kindly ask(s) the Fund and the Administrator to provide such reporting on the frequency determined by the Fund from time to time until such time as any written instruction to the contrary is provided from the Applicant(s).

The Applicant(s) acknowledge(s) that the Fund's shares have not been and will not be registered under the 1933 Act or any United States State Securities Laws.

The Applicant(s) hereby understand(s) that, the Fund's shares will be issued in non-certificated form, and a holder number will be allocated to the Applicant(s) on the contract note issued by the Administrator and The Applicant(s) must quote this number on all correspondence with the Administrator which shall not act upon any instruction unless it contains such holder number.

The Applicant(s) confirm(s) that it/he/she/they has/have read and understood the information contained in this Application Form and request the Administrator to act in accordance with the Applicant(s)'s instructions. The Applicant(s) confirm(s) that this application is made in accordance with the terms set out in the Prospectus and the KIID for the relevant share class.

The Applicant (s) acknowledge(s) and agree(s) that an investment in the Fund should be regarded as long term in nature and should form only part of a balanced investment portfolio – it is only suitable for experienced investors who appreciate the risks involved. The Applicant(s) may not recoup the amount originally invested.

The Applicant(s) acknowledge(s) that it/he/she/they is/are prepared and able to assume the particular risks inherent in an investment in the Fund, more particularly set out under the section headed "20. Risk Factors" of the Prospectus.

The Applicant(s) acknowledge(s) that where Fund's shares are issued to and held within a recognized clearing and settlement system, the Applicant(s)'s name will not appear on the Fund's register. The Applicant(s)' shares will be held in a nominee capacity that may differ depending on the arrangements the Fund has made with the specific recognised clearing and settlement system.

**Section 5 - Declarations and legal information continued****5.7 Acknowledgement and Declarations continued**

The Applicant(s) acknowledge(s) that it/he/she/they may, in such case, not be able to fully exercise their rights directly against the Fund.

Any email dealing must be sent to [fundsmith-email-dealing@ntrs.com](mailto:fundsmith-email-dealing@ntrs.com).

If payment in full has not been received by the Registrar and Transfer Agent by the date and time as set out in the relevant Fund Prospectus, the Company and/or the Transfer Agent reserves the right to charge the applicant for any resulting loss incurred by issuing a claim of interest.

The Applicant(s) shall indemnify the Fund against any loss arising to it as a result of, or in connection with, any breach by it/her/him/them of these declarations.

The Applicant expressly and formally acknowledge all provisions and disclosures relating to the processing of personal data which are contained or referenced in this Application Form and the Privacy Notice, and having received and/or having been given easy access to the Privacy Notice accompanies this Application Form or can be found on our website [www.fundsmith.eu/privacy](http://www.fundsmith.eu/privacy), by calling +352 28 294 136 or upon request addressed to [fundsmith-ta-lux@ntrs.com](mailto:fundsmith-ta-lux@ntrs.com) or to 10 rue du Château d'Eau, L-3364 Leudelange, Grand Duchy of Luxembourg for the attention of Northern Trust Global Services SE.

## Section 6 - Signature(s)

### Important information

By signing below the Applicant hereby states, represents and warrants that all of the representations, warranties and covenants made in this application are true and correct.

### Investor Agreement covering Appendices 3, 4, and 5

Luxembourg law requires us to obtain your consent to share the information.

By ticking this box, I indicate that

- (i) I have read and agree to the terms presented under Appendix 3 - E-mail dealing facility, Appendix 4 – Processing of personal data and Appendix 5 – Privacy policy and
- (ii) I mandate, authorise and instruct the Fund, the Management Company and the Administrator to hold, process and disclose my personal data as provided for under Appendix 4 – Processing of personal data and Appendix 5 – Privacy policy, including where the recipients are present in a jurisdiction outside of Luxembourg or the European Union and
- (iii) I acknowledge that this mandate, authorisation and instruction is granted to permit the holding, processing and disclosure of my personal data by such recipients in the context of the Luxembourg statutory confidentiality and personal data protection obligations of the Administrator and
- (iv) waive such confidentiality and personal data protection in respect of my personal data for the purposes provided for under Appendix 4 – Processing of personal data and Appendix 5 – Privacy policy.

### All investors must sign here

#### Authorised signatories

Name (please print in full)

**Signature**

**Date**

Name (please print in full)

**Signature**

**Date**

Name (please print in full)

**Signature**

**Date**

Name (please print in full)

**Signature**

**Date**

## Appendix 1 - Customer due diligence requirements per entity type

The section below details the documents and their format (simple copy, Original or CTC) required by the Administrator in order to make your account compliant to applicable laws and regulations.

Please note that, the Administrator may require additional information following review of the core documents.

Please go to the relevant section A - I depending on your entity type.

### Power of Attorney (POA)

Any investor authorizing a third party to act on its account will need to provide the Administrator with a duly dated and signed document, detailing the power of the third party. Any third party authorized to act on an account will also need to provide the Administrator with all documents applicable to its entity type.

#### A. All financial/credit institutions and their branches/subsidiaries/nominees

##### Documents to provide to the Administrator

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Share register/Evidence of ownership	n/a
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of funds (in AF or DDQ)	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest statutes, articles or equivalent	Copy
Evidence of regulation	Copy
List of directors (in DDQ or separated document)	Copy
Wolfsberg Questionnaire (if acting OBO 3rd party only)	Copy
AML Letter	n/a
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a

**APPENDIX 1 continued**
**Nominee Company**

In case the entity is a Nominee Company, or a subsidiary of a regulated financial institution, please also provide,

**Documents to provide to the Administrator**

Parent Company letter (signed by Compliance officer)	n/a
Parent (ASL) authorized Signatures List	n/a
Parent Wolfsberg Questionnaire	Copy
Evidence of regulation of the parent entity	Copy

**B. Public bodies (government or public authority)/Sovereign Wealth funds**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Share register/Evidence of ownership	n/a
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner	>25% copy
Source of wealth/Source of funds	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest statutes, articles or equivalent	Copy
List of directors (in DDQ or separated document)	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a

**APPENDIX 1 continued**
**C. Pension schemes**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial Owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Share register/Evidence of ownership	n/a
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of funds (in AF or DDQ)	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest statutes, articles, trust deed or equivalent	Copy
Evidence of regulation (ex : EIOPA, if applicable)	Copy
List of directors (in DDQ or separated document)	Copy
Latest Pension Scheme Rules or Wolfsberg questionnaire	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a

**Note: that some additional documents might be required regarding the employer/settlor or the pension fund.**

**D. Collective Investment Schemes (CIS)**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. Persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire (in the name of the Trust)	Copy
Beneficial Owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Evidence of ownership	n/a
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of funds (in AF or DDQ)	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
List of directors (in DDQ or separated document)	Copy
Evidence of regulation if applicable	Copy
List of directors (in DDQ or separated document)	Copy
Wolfsberg Questionnaire (from the regulated CIS or from the regulated entity performing AML)	Copy
AML Letter (from the regulated CIS or from the regulated entity performing AML)	n/a
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report (if applicable)	n/a



**APPENDIX 1 continued**
**E. Listed company on a regulated market**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of Funds	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest statutes, articles, or equivalent	Copy
List of directors (in DDQ or separated document)	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a
Evidence of listing	Copy
Assessment on the floating rate	Copy

**F. Commercial Companies, Limited Liability Companies, branches/subsidiary of a listed company**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification(ownership structure, or DDQ, with % of shareholdings/control)	Copy
Share register/Evidence of ownership	n/a
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of Funds	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest statutes, articles, or equivalent	Copy
List of directors (in DDQ or separated document)	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a
<b>Branches/subsidiaries of a listed company</b>	
Evidence of ownership by Parent	Copy
Evidence of listing (Parent)	Copy
Assessment on the floating rate (Parent)	Copy

**APPENDIX 1 continued**
**G. Partnerships**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification (ownership structure, parent letter or DDQ, with % of shareholdings/control)	Copy
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth/Source of Funds	info
(CRS/FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest constitutional document (e.g. Limited Partnership Agreement)	Copy
List of directors (in DDQ or separated document)	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a

Please note that we might require additional information for the General Partner (GP), and all other Partners, depending on the structure.

**H. Foundations, charities, churches, clubs, societies, associations, parties, schools, colleges, universities, trade unions.**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
(DDQ) Due Diligence Questionnaire	Copy
Beneficial owner identification(ownership structure, or DDQ, with % of shareholdings/control)	Copy
Ultimate Beneficial Owner register (if available)	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Source of wealth / Source of Funds	info
(CRS / FATCA) Tax Self Certification Form	Copy
Extract from Commercial Register or certificate of Inc.	Copy
Latest constitutional document (e.g. Foundation deed, trust deed, rules, charter)	Copy
List of directors/Trustees (in DDQ or separated document)	Copy
Settlement Instructions (SSI's) (IN/OUT)	Copy
Financial report	n/a
<b>Foundations only</b>	
Valid ID (+ proof of address if EDD) for founder(s) (if applicable)	Copy
Valid ID (+ proof of address if EDD) for Protectors(s) (if applicable)	Copy
<b>Charities only</b>	
Evidence of regulation (if applicable)	Copy

Please note that we might require additional information for the General Partner (GP), and all other Partners, depending on the structure.

**APPENDIX 1 continued**
**I. Trusts (patrimonial, other)**
**Documents to provide to the Administrator**

(AF) Application Form	Original
(ASL) Authorized Signatures List (dated, certified by 2 auth. persons)	CTC – Original
Valid ID (+ proof of address if EDD) for the AF signatories	Copy
Valid ID (+ proof of address if EDD) for the Deal signatories	Copy
Valid ID (+ proof of address if EDD) for Settlor & Trustee	Copy
Valid ID (+ proof of address if EDD) for Protector	Copy
(DDQ) Due Diligence Questionnaire	Copy
Valid ID of Beneficial Owner (+ proof of address if EDD)	>25% copy
Ultimate Beneficial Owner register (if available)	Copy
Source of wealth/Source of Funds	info
(CRS/FATCA) Tax Self Certification Form	Copy
Evidence of regulation (if applicable)	Copy
Trust deed/Constitution document	Copy
Extract from register of Trust/Trustees (if available)	Copy
Financial report (if applicable)	n/a
Settlement Instructions (SSI's) (IN/OUT)	Copy

## Appendix 2 - GLOSSARY CRS

**Note: These are selected definitions provided to assist you with the completion of the Tax Self-Certification form. Further details can be found in the Directive 2014/107/EU of 9 December 2014 “as regards to mandatory automatic exchange of information” and in the OECD Standard for Automatic Exchange of Financial Account Information (“OECD Common Reporting Standard, CRS”).**

### **“Account Holder”**

The “Account Holder” is the person listed or identified as the holder of the Debt or Equity Interest. This is regardless of whether such person is a flow-through Entity.

A person, other than a Financial Institution, holding a Debt or Equity Interest for the benefit or account of another person as agent, custodian, nominee, signatory, investment advisor, or intermediary, is not treated as holding the account, and such other person is treated as holding the account.

### **“Financial Institution”**

The term “Financial Institution” means a “Custodial Institution”, a “Depository Institution”, an “Investment Entity”, or a “Specified Insurance Company”. Please see the relevant domestic guidance and the CRS for further classification definitions that apply to Financial Institutions.

### **“Resident for tax purposes”**

Generally, a Person will be resident for tax purposes in a jurisdiction if, under the laws of that jurisdiction (including tax conventions), it pays or should be paying tax therein by reason of his domicile, residence, place of management or incorporation, or any other criterion of a similar nature, and not only from sources in that jurisdiction.

### **“TIN” (including “functional equivalent”)**

The term “TIN” means Taxpayer Identification Number or a functional equivalent in the absence of a TIN. A TIN is a unique combination of letters or numbers assigned by a jurisdiction to an individual or an Entity and used to identify the individual or Entity for the purposes of administering the tax laws of such jurisdiction. Some jurisdictions do not issue a TIN. However, these jurisdictions often utilise some other high integrity number with an equivalent level of identification (a “functional equivalent”). Examples of that type of number include, for individuals, the social security number.

## Appendix 3 - E-mail dealing facility

If you provided an email address in section 1.1, dealing instructions will be accepted only from the email address indicated above, kindly read the section below 'Request for electronic instructions capability and acceptance of risks'.

### Request for electronic instructions capability and acceptance of risks

This facility enables the Applicant(s) to send duly signed dealing instructions for trading in the Fund (subscriptions, switches, transfers and redemptions, excluding initial applications) to the Administrator in the form of a portable document format ('PDF') or a commonly used equivalent scanned form, transmitted via email and to have them acted upon instead of the usual requirement of physically delivering original signed instructions or sending them by facsimile.

By choosing e-mail dealing, I/We confirm :

- I/We understand and agree that the Fund and the Administrator will rely on such electronic instructions received in good faith without further enquiry.
- I/We authorise the Fund and the Administrator to rely on such electronic instructions, based on the terms contained under this section. If further clarification is required, this includes the right for the Fund and the Administrator to request original documentation.
- I/We understand and accept that electronic communications are not a secure form of communication and may be intercepted, altered or corrupted by unauthorised persons.
- I/We understand and accept that using and relying on electronic communications involves increased risk of fraud and of miscommunications including those due to a telecommunications system or equipment failure, misdirected communications or illegibility of the instructions or documents.
- I/We understand that I/we may still elect at any time to deliver originals either physically or by facsimile.
- I/We do not receive (i) a prompt automatic e-mail confirmation back from the Administrator associated e-mail address that is specified in the Application Form and (ii) a telephone call or an e-mail confirmation from a representative of the Administrator within twenty four hours (the "Confirmation Period"), if such instructions are sent on business days in Luxembourg between 9:00am and 6:00pm (CET) and if sent at any other times, the Confirmation Period will start the following business day in Luxembourg from 9:00am (CET), confirming the receipt of such dealing instructions. I/We will follow-up via telephone on +352 28 294 136 or email to fundsmith-ta-lux@ntrs.com whether the Administrator has received such e-mail dealing instruction.
- If sending dealing instructions via e-mail, I/we undertake to ensure that the e-mail is sent from an address provided to the Administrator by me/us below in this Application Form, e-mail subject line shall only read "Email dealing" and the documents attached to such e-mail are in PDF or other commonly used equivalent scanned format.

### Right of the Fund and the Administrator to not act on facsimile, e-mails and/or copies

I/We understand and agree that the Fund or the Administrator or both may choose not to rely on electronic communications. If this is the case, the Fund and the Administrator agree that, whichever of them elects not to act upon the electronic communications, they will try to contact us on the same day to advise us of their decision. I/We will not hold the Fund or the management company of the Fund (and they will not be) responsible if they choose not to act on electronic instructions, even upon signing up for e-mail dealing to the e-mail address given by me/us herein.

### Allocation of risk

I/We agree to bear the risks associated with using and relying on electronic communications and that the Fund or the Administrator will not accept any responsibility for any use of an incorrect email address, interception, failure, alteration or corruption of the electronic instructions, non-receipt of the electronic instructions, failure of the technical infrastructure, or any allotment, transfer, payment or other act done in good faith in accordance with electronic instructions.

If the Fund or the Administrator incur a loss of any nature due to their acting or failing to act on electronic communications received from me/us or due to equipment failure or any circumstances beyond the control of the Fund or the Administrator, I/we will indemnify and keep indemnified the Fund and/or the Administrator from all such loss.

## Appendix 4 - Processing of personal data

### Purposes of data processing

1. In relation to the processing of personal data (the “Data”) related to identified or identifiable natural persons (the “Data Subjects”) by the Fund (the “Controller”), the Applicant:
- (i) acknowledges that there may be a number of lawful bases for the Controller to jointly process different categories of Data related to Data Subjects and for several different purposes;
  - (ii) acknowledges (A) that Data processed in this way may be (a) Data concerning the Applicant as Data Subject and (b) Data which relates to each of the undersigned persons representing directly or indirectly the Applicant and which relates to Data Subjects who have not signed this Application Form, such as but not only beneficial owners, and which is or will be provided to the Controller by, at the initiative or in the mere knowledge or awareness of, the Applicant, and (B) that all the Data and Data Subjects referred under (A) are hereinafter collectively referred to as the “Related Data” and the “Related Data Subjects”, respectively;
  - (iii) represents and warrants having received full authority from each Related Data Subject and/or otherwise being fully entitled to provide, or to cause or allow the provision of, any Related Data to the Controller;
  - (iv) undertakes to promptly provide the Controller or any third party indicated by the Controller with any information regarding any Related Data Subject which the Controller may reasonably request in order to comply with their duties and obligations pursuant to applicable data protection laws and regulations;
  - (v) acknowledges and, to the extent required, irrevocably agrees that the Controller communicates directly, and where applicable separately, with any of the Related Data Subjects, in particular but not only if the Controller considers that this is necessary to comply with applicable data protection laws and regulations as well as applicable anti-money laundering/terrorist financing prevention obligations including beneficial ownership determination;
  - (vi) represents and warrants being required to inform in a timely manner each Related Data Subject of the processing of their Data by the Controller irrespective of whether this Data has been provided to the Controller, or its provision to the Controller has been caused or allowed, by the Applicant;
  - (vii) represents and warrants that, before or no later than at the time of providing, or causing or allowing the provision, of any Related Data to the Controller, the Related Data Subject has received or has been given easy access to the Controller’s full privacy information designated as the “Privacy Notice” in the section headed “Data protection” of the Prospectus [which Prospectus can be found through <https://www.fundsmith.eu/documents/>], and has taken the time to read and carefully consider the Privacy Notice;
  - (viii) acknowledges that the current version of the Privacy Notice accompanies this Application Form or can be obtained by visiting <https://www.northerntrust.com/united-states/privacy/emea-privacy-notice/detail>, [www.fundsmith.eu/privacy](https://www.fundsmith.eu/privacy), by calling +352 28 294 136 or upon request addressed to [fundsmith-ta-lux@ntrs.com](mailto:fundsmith-ta-lux@ntrs.com) or to 10 rue du Château d’Eau, L-3364 Leudelange, Grand Duchy of Luxembourg for the attention of Northern Trust Global Services SE.
  - (ix) represents and warrants having provided or at least having given easy access to the Privacy Notice to each Related Data Subject in a timely manner and in her/his language of reference and having invited each Related Data Subject to take the time to read and carefully consider the Privacy Notice;
  - (x) represents and warrants that the attention of each Related Data Subject has been drawn in particular to the information contained in the Privacy Notice concerning the topic of beneficial ownership and indicating among other things that Related Data may be transmitted to registers of beneficial owners and will in principle then be accessible to members of the general public unless an appropriate request for exemption from such public access has been filed and such exemption has been granted by relevant public authority;
  - (xi) represents and warrants that the attention of each Related Data Subject has also been drawn in particular to the limitation of liability and indemnification provisions contained in the Privacy Notice or in this Application Form, in particular but not limited to the provisions contained in section 2 below; and that each Related Data Subject has accepted or that the Applicant will cause the acceptance by each Related Subject of such limitation of liability and indemnification provisions;
  - (xii) represents and warrants that the attention of each Related Data Subject has also been drawn in particular to the limitation of liability and indemnification provisions contained in the Privacy Notice or in this Application Form, in particular but not limited to the provisions contained in section 2 below; and that each Related Data Subject has accepted or that the Applicant will cause the acceptance by each Related Subject of such limitation of liability and indemnification provisions;

**Appendix 4 continued****Purposes of data processing continued**

- (xiii) agrees that any change or update to the Privacy Notice that the Controller is under a duty to notify to any Related Data Subject including the Applicant will be duly and fully notified to the Applicant and any Related Data Subject either (A) by the transmission of an email linking to this change or update to the email address mentioned in section 1.1 or 2.1 of this form, and/or (B) by the publication of this change or update on [www.fundsmith.eu](http://www.fundsmith.eu);
  - (xiv) undertakes to continue notifying each Related Data Subject, in a timely manner and in her/his language of reference, of any notification of change or update to the Privacy Notice notified to the Applicant pursuant to the foregoing sub-paragraph (xiii) or otherwise received by the Applicant from the Controller;
  - (xv) acknowledges that, notwithstanding any notification of change or update from the Controller, an updated version of the Privacy Notice may be easily obtained or accessed at any time as indicated in the chapter headed "Data protection" of the Prospectus;
  - (xvi) represents and warrants that, when a processing of Data is and/or will be based on the consent of any Related Data Subject, the Applicant's consent to such processing given either in this Application Form or separately means (A) that the corresponding consent by the Related Data Subject (a) has been and/or will have been obtained in due time from the Related Data Subject and (b) is and/or will be fully valid under the applicable data protections laws and regulations, and (B) that the Applicant is and/or will be able to provide evidence thereof upon simple request from the Controller;
  - (xvii) undertakes to notify the Controller in a timely manner (A) of any withdrawal of any consent given by any Related Data Subject, and (B) more generally of any decision or event which affects or may affect the Controller's processing of the Related Data; and
  - (xviii) agrees to indemnify and hold harmless the Controller to the fullest extent authorised by applicable law, for and against any loss, damage or adverse consequence suffered by them (a) which is arising from their processing of Related Data, unless any such loss, damage or adverse consequence results from their negligence, or (b) which is caused or contributed to, directly or indirectly, by the Applicant or any Related Data Subject not fully complying with the foregoing.
2. The Applicant acknowledges and agrees that the liability of the Controller in relation to the processing of Related Data is strictly limited to any liability provided for in applicable laws and regulations. In particular, without prejudice to the general nature of the foregoing or to what is stated in the Privacy Notice, the Applicant:
- (i) acknowledges that Related Data may be sent, communicated, disclosed, accessed by, or otherwise made available (collectively "transmitted") to third parties including in principle to members of the general public via registers of beneficial owners, where applicable; and agrees that the Controller bears no liability for any Related Data being transmitted to any third party, within or outside of the European Economic Area, without an express authorisation from the Controller and, more generally, for any such unauthorised third party having or obtaining knowledge of Related Data;
  - (ii) acknowledges that the Controller may from time to time provide or make privacy notices issued by third parties which are acting as controllers in their own right in relation to the Related Data, and agrees that the Controller bears no liability in relation to these third-party privacy notice, nor in relation to any processing performed by these third-party controllers;
  - (iii) acknowledges that the Controller may from time to time unintentionally collect or obtain Related Data which the Controller has no intention nor interest to process in view of the purposes described in the Privacy Notice, but which the Controller may nevertheless store or transfer the "Unsolicited Related Data"; undertakes to adopt all appropriate measures to prevent such Unsolicited Related Data to be collected or obtained by the Controller; and agrees that the Controller bears no liability for any damage suffered and resulting directly or indirectly from the processing of Unsolicited Related Data.

## Appendix 5 - Privacy policy

**The Fund, the Management Company and the Administrator consider customer privacy to be a fundamental aspect of our relationships with shareholders and are committed to maintaining the confidentiality, integrity and security of our current, prospective and former shareholders' personal information. To ensure our shareholders' privacy, the Fund, the Management Company and the Administrator have developed policies that are designed to protect this confidentiality, while allowing shareholders' needs to be served.**

The Applicant(s) understand(s) that the Fund and its delegates may record or monitor telephone calls between it/him/her/them and the Fund and its delegates, to ensure that instructions can be checked and that the Fund and its delegates are meeting their service standards.

The Applicant(s) acknowledge(s) that the Fund and its delegates, or anyone else mentioned below may give information about it/him/her/them and it/his/her/their account:

- between the Fund and its delegates.
- to people who provide a service to the Fund or its delegates, on the understanding that they will keep the information confidential.
- to anyone to whom the Fund and its delegates transfer or may transfer their rights and duties under this declaration.
- to anyone if the Fund and its delegates have a duty to do so or if the law allows them to do so.

Otherwise the Fund and its delegates will keep information about it/her/him/them confidential, other than if the Applicant(s) has/have carried out transactions through a financial adviser when that adviser will be deemed to be it/his/her/their delegate to whom full details of it/his/her/their investments will be disclosed unless the Applicant(s) advise the Fund and its delegates to the contrary in writing.

I/we understand that I/we may request a copy of our information from the Fund and its delegates to correct any inaccuracies.

### Obtaining Personal Information

In the course of providing shareholders with products and services, the Fund, the Management Company and/or the Administrator may obtain non-public personal information about shareholders, which may come from sources such as account applications and other forms, from other written, electronic or verbal correspondence, from shareholder transactions, from a shareholder's brokerage or financial advisory firm, financial adviser or consultant, and/or from information captured on our internet web sites.

### Respecting Your Privacy

As a matter of policy, the Fund, the Management Company and/or the Administrator do not disclose any personal or account information provided by shareholders or gathered by them to non-affiliated third parties, except as required for their everyday business purposes, such as to process transactions or service a shareholder's account, or as otherwise permitted by law. As is common in the industry, non-affiliated companies may from time to time be used to provide certain services, such as preparing and mailing Prospectuses, reports, account statements and other information, and gathering shareholder proxies. The Fund, the Management Company and/or the Administrator may also retain non-affiliated financial services providers to market the shares and we may enter into joint-marketing arrangements with them and other financial companies. The Fund, the Management Company and/or the Administrator may also retain marketing and research service firms to conduct research on shareholder satisfaction. These companies may have access to a shareholder's personal and account information, but are permitted to use this information solely to provide the specific service or as otherwise permitted by law. The Fund, the Management Company and/or the Administrator may also provide a shareholder's personal and account information to their respective brokerage or financial advisory firm, depository, and/or to their financial advisor or consultant.

### Sharing Information with Third Parties

The Fund, the Management Company and/or the Administrator reserve the right to disclose or report personal information to non-affiliated third parties where that disclosure is required under law to cooperate with regulators or law enforcement authorities, to protect our rights or property or upon reasonably acceptable request by any investee entity in which a shareholder has chosen to invest.

Some national or foreign laws, regulations or payment systems may require identification of the person placing the order and its beneficiary. Your attention is drawn to the fact that where assets are to be transferred, the Administrator may have to disclose the Information relating to you to third parties, including public authorities and correspondent banks of the Administrator.

Data, including data of a personal nature, included in cross-border transfers shall be subject to processing by the Administrator and other specialised intermediaries and in particular SWIFT (Society for Worldwide Interbank Financial Telecommunication). Such processing may take place in centres established in other member states of the EU, in Switzerland, in the United Kingdom, in the United States of America and other countries pursuant to local regulations. The consequence, inter alia, thereof, is that the authorities of such countries and foreign authorities may request access to such data, in the context of the fight against terrorism or for other purposes.



**Appendix 5 continued****Sharing Information with Affiliates**

The Fund, the Management Company and/or the Administrator may share shareholder information with their affiliates in connection with their affiliates' everyday business purposes, such as servicing a shareholder's account, but their affiliates may not use this information to market products and services to you except in conformance with applicable laws or regulations. The information the Fund, the Management Company and/or the Administrator share includes information about their experiences and transactions with a shareholder and may include, for example, a shareholder's participation in the Funds or in other investment programs, a shareholder's percentage ownership of certain types of accounts, or other data about a shareholder's transactions or accounts.

But also include the following type of information:

- corporate name, address of registered office, registration number with the relevant corporate registry, date and place of incorporation, nationality, legal form, shareholder structure;
- information on identification documents: deed and articles of incorporation, excerpts from corporate registry, shareholder register;
- tax domicile and other tax-related documents and information, including FATCA and/or CRS status; and
- transactions, assets and orders and communications relating thereto;

Our affiliates, in turn, are not permitted to share shareholder information with non-affiliated entities, except as required or permitted by law.

Accordingly you authorise the Administrator, to disclose to its affiliates and branches in the EU and the EEA and outside the EEA (in particular in India, Ireland, Hong Kong, the Philippines, Singapore, United Kingdom and the United States of America), information on you, your investors, beneficial owners and representatives. The Administrator will take all reasonable steps to ensure an affiliate or branch treats such disclosed information as confidential.

**Procedures to Safeguard Private Information**

The Fund, the Management Company and the Administrator take seriously the obligation to safeguard shareholder non-public personal information. In addition to this policy, the Fund, the Management Company and the Administrator have also implemented procedures that are designed to restrict access to a shareholder's non-public personal information only to internal personnel who need to know that information in order to provide products or services to such shareholders. In addition, the Fund, the Management Company and the Administrator have physical, electronic, and procedural safeguards in place to guard a shareholder's non-public personal information.

**Consumer reporting agency data**

The Fund, the Management Company and the Administrator will dispose of records; if any that are knowingly derived from data received from a consumer reporting agency regarding a shareholder that is an individual in a manner that ensures the confidentiality of the data is maintained. Such records include, among other things, copies of consumer reports and notes of conversations with individuals at consumer reporting agencies.

## Appendix 6 - Anti-Money Laundering (AML) and Terrorist Financing Prevention

### Anti-money laundering requirements

Pursuant to the Luxembourg Law of November 12, 2004, as amended on the fight against money laundering and terrorist financing, the CSSF Regulation n° 12-02 of December 14, 2012, the Circular CSSF 20/744 of 17 February 2017 and EU Directives issued by the European Parliament and Council relating to the prevention of money laundering and terrorist financing, as amended from time to time (the "Anti-Money Laundering Laws"), obligations have been imposed on all professionals of the financial sector to prevent the use of undertakings for collective investment for money laundering purposes and terrorist financing purposes.

The Central Administration will perform the procedure for the identification of Shareholders in accordance with the obligations set forth by the Anti-Money Laundering Laws.

Pursuant to the Anti-Money Laundering Laws, the Administrator must identify the Applicant and the economic origin of the funds to be invested. Such laws and regulations require Applicants to declare to the Administrator their identity and the identity of any Beneficial Owners of the subscription. The Administrator is required to establish controls to determine the identity of Applicants, Beneficial Owners, investor proxies (and any persons on whose behalf they are acting).

The Applicant(s) represent(s) that all subscription payments transferred to the Fund originated directly from a bank account in the name of the Applicant(s). If the Applicant(s) is/are applying on behalf of a Beneficial Owner, then the Applicant(s) represent(s) that all subscription payments transferred to the Applicant(s) with respect to such Beneficial Owner originated directly from a bank account in the name of such Beneficial Owner. The Applicant(s) represent(s) and warrant(s) that acceptance by the Administrator of this Application Form, together with acceptance of the appropriate remittance, will not breach or circumvent any applicable rules and regulations designed to prevent money laundering and the financing of terrorism. Specifically, the Applicant(s) represent(s) and warrant(s) that all evidence of identity is genuine and all related information furnished and to be furnished is accurate. Further, the Applicant(s) represent(s) and warrant(s) that it/he/she/they has/have a policy in place designed to identify clients who are or have been politically exposed persons, categorize them according to risk and ensure enhanced due diligence and monitoring are conducted where appropriate.

**Beneficial Ownership.** The Applicant(s) represent(s) that it/he/she/they do(es) not have the intention or obligation to sell, distribute or transfer the shares, directly or indirectly, to any other person or entity or to any nominee account. If the Applicant(s) is/are (i) acting as trustee, agent, custodian, representative or nominee for another person or entity, or (ii) an entity(ies) (other than a publicly-traded company listed on an organized exchange or a subsidiary or a pension fund of such a company based in a Financial Action Task Force ("FATF") jurisdiction investing on behalf of underlying investors the persons, entities and underlying investors referred to in (i) and (ii) being referred to collectively as the "Beneficial Owners", the Applicant(s) represent(s) and warrant(s) that:

The Applicant(s) understand(s) and acknowledge(s) that the representations, warranties and agreements are made by Applicant(s) with respect to Applicant(s) and with respect to each of the Beneficial Owners;

The Applicant(s) has/have all requisite power and authority from each of the Beneficial Owners to execute this Form;

The Applicant(s) has/have established the identity of all Beneficial Owners, hold(s) evidence of such identities and will make such information and documentation available to the Administrator together with the Application Form.

### Required documentation

Shares will only be issued once the Administrator has received a duly completed, original Application Form and any required identification documents. Should an Applicant fail to provide the requested documents or information, the subscription monies or any required identification documents in a form acceptable to the Administrator, the processing of the application may be delayed or rejected. In relation to any application for subscription or redemption, or transfer of the Fund's shares the Administrator may require at any time such documentation as it/they deem(s) appropriate. Failure to provide such information in a form which is satisfactory to the Fund and/or the Administrator may result in any application or transfer request not being processed. Should documentation not be forthcoming with regard to the return of payments or the redemption of the Fund's shares, then such payment may not proceed. In addition to the Application Form, further documentation will be requested in order to comply with any legal and regulatory requirements. The list of documents will depend on the account risk level determined by the Administrator.