



EVENLODE

Evenlode ICAV

Account Opening and Initial Subscription Form

Instructions for completion of the Account Opening and Initial Subscription Form

On completion, the original fully signed Account Opening and Initial Subscription Form should be returned to the Administrator (in respect of an initial subscription in the Fund):

The Administrator:

Société Générale Securities Services, SGSS (Ireland) Limited

3rd Floor

IFSC House,

IFSC,

Dublin 1

Ireland

Phone: +353 (0)1 6750 300

Email: Service.Ta-Dublin@sgss.socgen.com

A copy of the fully signed Account Opening and Initial Subscription Form should also be faxed to the Administrator at +353 (0)1 6750351

All applicants must complete pages 2 and 3 and sign the declaration on page 11, taking note of the AML Requirements and information detailed on pages 4 to 10.

All applicants investing in the name of an individual or as a controlling person should additionally complete and sign the necessary declarations on pages 12 to 17.

Applicants investing as an entity should additionally complete and sign the necessary declarations on pages 18 to 25, and in that regard please note the related Customer Information Notice at Appendix 1.

Non-Irish Residents and Irish Residents who are exempt from investment undertaking tax should also complete the relevant declarations on page 26.

Irish residents who are not exempt from tax must complete the relevant declarations on pages 27 to 29.

All applicants should read the Privacy Notice that is included in Appendix 2.

The Subscription/Redemption form on pages 34 to 36 is for you to use for instructing subsequent investments and redemptions from your account after it has been opened with your initial investment

We wish to purchase:

Evenlode ICAV – The Evenlode Global Income Feeder Fund (the “Fund”)			
Share Class	Currency	No of Shares (if known)	Gross Investment Amount

*Note that subscriptions for Euro Shares must be received in Euro, subscriptions for GBP Shares must be received in GBP and subscriptions for USD Shares must be received in USD. For a full list of available share classes please visit www.TCFundSolutions.com

1. NAME(S) FOR REGISTRATION (BLOCK CAPITALS)

Full Registered Name: _____

Contact person (if different from above): _____

Registered Address: _____

Mailing Address (if applicable): _____

PO Boxes should not be provided for the purpose of a registered address but may be used as a correspondence address

Place of Incorporation: _____ **Entity Type:** _____

Fax No: _____ **Telephone No:** _____

Email (if applicable to below): _____

Please note that by providing contact email address and / or fax numbers, you are electing to receive subscription and redemption confirmations, account statements and other reports via email and / or fax to these contact details and copies will not be issued by post (regular mail) unless you request this in writing.

Any change, addition or deletion to those details provided on the original Application Form must be submitted in writing, signed by the appropriate authorised signatories. The amendment will only be effected on receipt of original documentation by the Administrator.

2. INVESTOR BANK ACCOUNT DETAILS (MANDATORY)

Please provide below full banking details for the bank account from which the appropriate subscription settlement is being received. Settlement can only be accepted by telegraphic transfer from a bank account in the applicant's own name and a detailed written explanation is required for approval if this is not the case. The below account details provided will be maintained on file as the redemption account of record for this investment and future payments back to the relevant Shareholder(s) will be returned to this account unless a written request for change has been received and approved. Interest is not earned on early subscription settlement.

Name of Bank _____

A/c Name _____ A/c Number _____

Address of Bank _____

Swift Code _____ ABA Number _____

IBAN _____

NO THIRD PARTY PAYMENTS WILL BE UNDERTAKEN

Please ensure that you have read the Prospectus for the ICAV and the Supplement for the Fund (the "Prospectus") before completing this Application Form. Defined terms used in this Application Form are those used in the Prospectus.

3. DEALING PROCEDURE

Please note that if this is the applicant's first investment in the Shares of a Fund, no repurchase, exchange or transfer requests will be processed prior to receipt of this original Application Form and original or certified copy of supporting documentation as required in connection with anti-money laundering procedures (AML documentation). The Administrator on behalf of the ICAV will advise each applicant of its acceptance of any offer to subscribe for Shares of the Fund, but the ICAV reserves the right to reject any offer, including this initial offer or any subsequent offer, at any time prior to the ICAV's acceptance of the offer. The Administrator is required to receive full AML documentation prior to returning any monies.

Subscriptions

The Application Form must be received by no later than 9:30am (Dublin time) on the relevant Subscription Date. Applications received after that time will be deemed to have been received for the next succeeding Subscription Date.

Subscription monies must be received by the Administrator by no later than, in the case of the Initial Offer, the date on which the Initial Offer closes. Thereafter, subscription monies must be received by the Administrator for the account of the Fund by the third Business Day after the relevant Subscription Date on which the Shares are to be issued.

Redemptions

Redemption instructions must be received by no later than 9:30am (Dublin time) on the relevant Redemption Date. Unless the Directors, in their absolute discretion, determine otherwise, instructions received after that time will be held over until the next Redemption Date. Applicants should complete the redemption instruction section of the Subscription/Redemption Form to assist the Administrator in remitting proceeds.

Requests for redemption must be made in such format or method provided for in the Prospectus (i.e. by post or by fax) and the Supplement relating to the Fund and agreed with the Administrator in advance, subject to and in accordance with the requirements of the Central Bank. Redemption proceeds may not be released until duly prepared and complete redemption documentation have been received. Redemptions will not be processed on non cleared/verified accounts.

Settlement for redemptions will normally be made by telegraphic transfer or other form of bank transfer to the bank account of the Shareholder specified in this Application Form (at the Shareholder's risk) within five Business Days after the Redemption Date, provided the Administrator has received the correct repurchase documentation, including all relevant anti-money laundering documentation. In any event, subject to the terms of the Prospectus and in the Fund Supplement, the period for payment of redemption proceeds shall not exceed ten Business Days following the deadline that redemption requests must be received by. No payments to third parties will be effected.

AML REQUIREMENTS

Please contact the Administrator to clarify the specific AML documents to be submitted based on investor type. Please note that the documentation requirements set forth hereunder do not necessarily constitute a definitive list. In accordance with the terms of the Prospectus, additional proof of identity documentation may be required from any applicant at the sole discretion of the Administrator and/or the ICAV.

If a regulated investor:

- Original Application Form
- Completed declaration of non-Irish residency
- Completed FATCA and CRS declaration
- Bank details
- Certified or original authorised signatory list
- If acting as an intermediary, further documentation will be required
- Completed Source of Wealth Document

If a retail investor:

- Original Application Form
- Completed declaration of non-Irish residency
- Completed FATCA & CRS declaration
- Bank details
- Original or certified copy of proof of identity with specimen signature (e.g. *passport, drivers licence*)
- Two original or certified copy of proof of address dated within the past 6 months. (e.g. *bank statement, utility bill*) *Note: PO Box, 'care of' or Mobile Phone bills are not acceptable as proof of address*
- Completed Source of Wealth Document

If an institutional investor established as a corporate entity:

- Original Application Form
- Completed declaration of non-Irish residency
- Completed FATCA & CRS declaration
- Bank details
- Authorised signatory list
- Company formation documentation (**e.g. Memorandum and Articles of Association or equivalent**)
- Certificate of Incorporation
- Register of Directors
- Names, dates of birth and addresses of Directors

- Certified copies of the passports & proof of residential address within 6 months for 2 Directors or 1 Director & 1 Authorised Signatory
- Register of Members/Shareholders
- Identification (as set out under retail investor) of ultimate beneficiaries owning in excess of 25% of the issued share capital
- Completed Source of Wealth Document

Other entity types will require their own unique documentation which will be communicated to an applicant. Such other entity types may include, but are not necessarily limited to, the following:

- Charities
- Government entities
- Politically Exposed Persons (“**PEP**”) – a PEP is an individual who has at any time in the preceding 12 months been, entrusted with a prominent public function.
- Clubs and Societies
- Collective Investment Schemes
- Foundations
- Funds
- Pension Schemes
- Occupational Pension Schemes
- Entities listed on a stock exchange
- Entities based in non-prescribed countries
- Partnerships or trusts
- Universities
- Nominee Structures

Certification rules: Documents must be originally certified. Certification must include a statement to the effect that the original of the document was sighted. All certification must be signed, dated and include the name, address and where applicable the professional registration of the certifier. The following are considered suitable persons to certify documentation:

- Garda Síochána / Police Officer,
- Practising Chartered & Certified Public Accountants
- Notaries Public / Practising solicitors
- Embassy/Consular Staff
- Regulated financial or credit institutions
- Justice of the peace
- Commissioner for oaths
- Medical professional

4. METHOD OF PAYMENT

Payment must be made by electronic transfer to the following bank accounts:-

GBP Payment Details

GBP Corresponding Bank:	BARCLAYS BANK LONDON
GBP Bank Swift	BARCGB22
Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5038 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0503 8031 3969 942
Beneficiary Account Name	EVENLODE GLOBAL INCOM FE FD COLL

Euro Payment Details

Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5000 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0500 0031 3969 961
Beneficiary Account Name	EVENLODE GLOBAL INCOM FE FD COLL

USD Payment Details

USD Corresponding Bank:	Société Générale (New York)
USD Bank Swift	SOGUES33
Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5030 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0503 0031 3969 946
Beneficiary Account Name	EVENLODE GLOBA IN FE FD COL

5. SIGNATURES AND DECLARATIONS

1. I/we hereby acknowledge as part of this application that I/we have been offered the Prospectus and Supplement and where applicable the most recent annual or half-yearly reports and accounts for the relevant Fund and furthermore that this application is made on the terms thereof and subject to the provisions of the Prospectus, Supplement and the Instrument of Incorporation and acknowledge that I/we am/are bound by the terms of the relevant Fund as set forth in the aforementioned documents.
2. I/we have made arrangements for payment to be made by electronic transfer in accordance with Section 4 and acknowledge that the Directors reserve the right to reject in whole or in part any aspect of this application.
3. I/we hereby represent and declare that I/we: (i) am/are not a US Person as defined in the Prospectus; (ii) have not been solicited to purchase and have not and will not acquire Shares while present in the United States; (iii) am/are not applying as a nominee of a US Person and I/we am/are not acting on behalf of nor do I/we intend to transfer any Shares to any US Person(s); (iv) will not transfer any Shares or any interest therein to a US Person and will not transfer any Shares within the United States; and (v) will promptly notify the relevant Fund if I/we should at any time become a US Person. I/we confirm that I/we have the authority to make this investment whether the investment is my/our own or is made on behalf of another person or institution. 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 the Shares and am/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.
4. I/We hereby acknowledge that certain laws and regulations may require disclosure of my/our identity (and other details) under some circumstances, and such disclosures may be a matter of public record. I/we acknowledge such disclosure and, to the extent permitted by law, waive any rights I/we may have under any law that could prevent such disclosure. I/ we hereby acknowledge that certain personal information relating to me/us may be disclosed to the tax authorities in the United States of America and in my/our country of residence in accordance with FATCA (as defined below), the OECD Common Reporting Standard and applicable local regulations. I/we further acknowledge that in order to comply with the provisions of the U.S. Foreign Account Tax Compliance Act ("FATCA") and avoid the imposition of U.S. federal withholding tax and to comply with the laws and regulations implementing the Common Reporting Standard ("CRS") and any other tax reporting obligations, the ICAV and its delegates may from time to time require further information and/or documentation from me/us and my/our direct and indirect beneficial owners (if any), relating to any of our identities, residences (or jurisdictions of formation) and income tax status, and may provide or disclose such information and documentation to the Revenue Commissioners of Ireland who will send such information to the IRS or any other relevant authority, as the case may be. I/we agree that I/we shall provide any such information and documentation concerning myself/ourselves or my/our beneficial owners (if any) when reasonably requested by the ICAV. I/we acknowledge that, if I/we do not provide the requested information and documentation, the ICAV may, at its sole option and in addition to all other legal or equitable remedies, immediately redeem my investment, prohibit additional investment, decline or delay any redemption request and/or deduct from my/our account and retain amounts sufficient to indemnify and hold harmless the ICAV from any and all withholding taxes, interest, penalties and other losses or liabilities suffered by the ICAV on account of any failure by me/us to provide all requested information or documentation in a timely manner. I/we acknowledge and agree that I/we will have no claim against the ICAV or any of its affiliates, agents or delegates for any form of damages or liability as a result of any of the aforementioned actions.

5. I/we hereby agree to indemnify and hold harmless the ICAV, Depositary, Administrator, Investment Manager, Manager, Distributor and the other Shareholders and their respective directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation by me/us or breach by me/us of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the ICAV or relevant Fund. None of the ICAV, Depositary, Administrator or Distributor shall be responsible or liable for the authenticity of instructions received from me/us or any authorised person, including instructions received through electronic dealing methods, and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed to be genuine, notwithstanding that it may be shown that the instructions were not signed, given or sent by the applicant. I/we also agree to indemnify and hold harmless the ICAV, Depositary, Administrator, Investment Manager, Manager, the Distributor and the other Shareholders and their respective directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result from my/our holdings of Shares in the relevant Fund which brings the relevant Fund into conflict with any requirement of any local regulatory authority or the relevant Fund incurring any liability to taxation or breaching any law or regulation of any local regulatory or taxation authority.
6. I/we hereby acknowledge that the Administrator may in the future electronically deliver reports to Shareholders. Such reports may include but are not limited to contract notes, holdings confirmations, valuation statements and other reports which may be issued by the Administrator from time to time. I/we hereby agree that the Administrator and its directors, officers, employees and agents shall be fully indemnified and shall not be liable to the ICAV or to any Shareholders in the relevant Fund for any direct loss, damage, expense (including without limitation, legal counsel and professional fees and other costs and expenses incurred in connection with the defence of any claim, action or proceedings) occasioned by act or omission of the Administrator and its directors, officers and employees in connection with the electronic delivery of reports other than as a result of the fraud, negligence, bad faith, willful misconduct or reckless disregard of the Administrator in the performance of its duties as Administrator of the relevant Fund.
7. I/we acknowledge that due to anti-money laundering requirements operating within their respective jurisdictions the ICAV, the Administrator or the Distributor (as the case may be) may require further identification from me/us, as described in the Prospectus and the Supplement, at any time in relation to this application and the ICAV, the Administrator and the Distributor shall be held harmless and indemnified against any loss arising as a result of a failure to process the application if such information has been required by the parties referred to and has not been provided by me/us. I/we also warrant and declare that the monies being invested pursuant to this Application Form do not represent directly or indirectly the proceeds of any criminal activity and that the investment is not designed to conceal such proceeds so as to avoid prosecution for an offence or otherwise.
8. I/we undertake to abide by the restrictions on transfers of Shares set out in the Prospectus and the Supplement and under the heading "Transfers" in the Prospectus and the Supplement. In addition, I/we undertake to complete an Application Form in respect of such transfer.
9. I/we hereby confirm that no provision of any applicable law, regulation or document by which I/we am/are bound prohibits the investment in the Fund by me/us.
10. My/our investment has been duly approved by all persons whose approval is required, and such investment is not prohibited or restricted by any provisions of the governing or any related instrument of or pertaining to me/us.
11. I am/we are able to bear the economic risks of this investment and have adequate means of providing for current needs and possible contingencies.

12. I/we have such knowledge and experience in financial and business matters that I am/we are capable of evaluating the merits and risks of this investment and of making an informed investment decision, and have relied solely upon the advice of my/our own counsel, accountant and other advisers, with regard to the legal, investment, tax and other considerations regarding this investment.
13. In the event that any contribution is made in securities, I/we hereby confirm I am/we are the sole beneficial owner of the securities, free and clear of any mortgage, pledge, lien, charge or other security interest of any kind thereon or affecting the title thereto and shall be entitled to transfer such securities without violation of the securities registration, securities disclosure or similar laws of any jurisdiction to which such transfer may be subject.
14. I/we also represents and warrants to, and agrees and covenants with, the Fund, as of the date hereof as of each subsequent date on which I/we acquire any additional Share Classes in the Fund that, to the best of my/our knowledge, none of my/our related parties is a politically exposed person ("PEP" or "PEPs") nor are any of the related parties associated with PEPs as such term is explained in the footnotes below.
15. I/we hereby acknowledge and agree that the Manager and the Investment Manager shall be entitled to receive compensation from the Fund for services rendered with respect to my/our assets which have been invested in the Fund in accordance with the rates, the frequency, and method of payment as set forth in the Prospectus and the Supplement.
16. Pursuant to the UCITS directive, I/we acknowledge that the Manager is required to provide me/us with access to the relevant KIID prior to investment. I/we hereby acknowledge and understand that the KIID is not a financial promotion. /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 and the Privacy Notice (at Appendix 2 of the Application Form) which sets out the ICAV's obligations under applicable data protection law) has been supplied to me/us. I/we hereby acknowledge and understand that the information is required by law to help me/us understand the nature and risks of investing in the relevant fund. I/we hereby accept that updates to the Prospectus, the relevant Supplement and the KIID can be provided by email. I/We hereby confirm that for any subsequent investments I/we will obtain and read the latest version of the appropriate KIID and Privacy Notice prior to each subscription. In the event that I/we am/are acquiring shares on behalf of an underlying investor or pool of investors, I/we hereby confirm that I/we have provided each investor with a copy of the latest KIID and on an ongoing basis I/we will ensure that these and any new investor(s) will be provided with the current KIID for the relevant share class into which I/we am/are investing on their behalf.

17. I/we confirm, **by ticking the following box**, that I am a/we are resident(s) of the Republic of Ireland and subject to withholding tax as described in the Prospectus.

To be valid, this Application Form must be signed by each applicant and if not fully completed to the satisfaction of the relevant Fund, the Administrator or the Distributor, the application may be rejected. In the case of a partnership/firm, applications should be signed by all the partners/proprietors. In the case of a corporation, applications should be executed under seal or signed by a duly authorised person(s) who should state the representation capacity. In the case of a trust, application should be made in the individual names of the trustees and should be accompanied by duly certified documentation. If this Application Form is signed under power of attorney, such power of attorney or a duly certified copy thereof must accompany this Application.

All joint applicants must sign in the same order as in Section 1

1.		3.	
2.		4.	
Date			

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

Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the 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 Revenue Commissioner's website at: <http://www.revenue.ie/en/business/aeoi/index.html> or the following link to the OECD CRS Information Portal at: <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

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

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

Section 1, 2, 3 and 5 must be completed by all investors

Section 4 should only be completed by any individual who is a Controlling Person of an entity investor which is a Passive Non-Financial Entity. For further guidance see: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/#d.en.345314>

(Mandatory fields are marked with an *)

Section 1: Investor/Controlling Person Identification

Investor Name*: _____

Current Residential Address*:

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Place and Date Of Birth*

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

Date of Birth*: _____

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

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

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

OR

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

Section 3: CRS Declaration of Tax Residency (please note you may choose more than one country)*

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

Country of Tax Residency	Tax ID Number (TIN)

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

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

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

Section 4: Type of Controlling Person

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

For Joint or multiple Controlling Persons please use a separate Self-Certification form for each Controlling Person

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the investor 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 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 where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

Data Protection - Customer Information Notice:

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

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

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

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

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

Authorised Signature*: _____

Print Name*: _____

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

Capacity*: _____

Source of Wealth Declaration - Individual

All information provided in this document will remain strictly confidential

Document to be returned by post as original

Name and First Name:	
Country of Residence:	
Occupation:	<p>Please provide a precise description of activity : (as example: employee of post office, manager of bank, restaurant owner, car salesman...)</p> <p>Profession: _____</p> <p>If retired or unemployed, please indicate former profession:</p> <p>Retired: _____</p> <p>Unemployed: _____</p>
I declare:	<p><input type="checkbox"/> I am the ultimate beneficial owner of the monies invested</p> <p><input type="checkbox"/> I am not the ultimate beneficial owner of the monies invested</p> <p><i>(a certified ID/Passport copy of this person is to be sent with this declaration)</i></p>
I further declare:	<p>The monies invested do not originate from criminal activity, of whatever nature, and in particular do not constitute the proceeds of money laundering.</p> <p>Any profits derived from my investment will not be used for terrorism financing.</p>
I declare that the monies invested do not come from a third party and is drawn from my own bank account. These funds originate from the following source:	<p><input type="checkbox"/> Salary savings <input type="checkbox"/> Inheritance*</p> <p><input type="checkbox"/> Real Estate Sale (please specify*): _____</p> <p><input type="checkbox"/> Gift (Please specify)*: _____</p> <p><input type="checkbox"/> Other* (please add a precise source): _____</p>

*Please be advised, that Société Générale Securities Services, SGSS (Ireland) Limited in their capacity as Registrar and Transfer Agent may request additional information if necessary.

Signature.....

Date

Entity Self-Certification for FATCA and CRS

Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the 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 Revenue Commissioner's 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 about the investor's tax residence or FATCA/CRS classification changes in the future, please advise of these changes promptly.

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

(Mandatory fields are marked with an *)

Investors that are individuals should not complete this form and should complete the form entitled "Individual Self-Certification for FATCA and CRS".

Section 1: Investor Identification

Investor Name*: _____ (the "Entity")

Country of Incorporation or Organisation: _____

Current 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 Specified U.S. Person*:

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 (please also complete Sections 4 and 5):

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

Indicate exemption: _____

Section 3: Entity's FATCA Classification* (the information provided in this section is for FATCA, please note your 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

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:

I.	<p>The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i> Please provide the sponsor's name and sponsor's <i>GIIN</i> : Sponsor's Name: _____ Sponsor's <i>GIIN</i>: _____</p> <p>NOTE: <i>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.</i></p>	
II.	<p><i>Exempt Beneficial Owner</i></p> <p><i>Please tick and confirm the category of Exempt Beneficial Owner;</i></p> <p>I. <input type="checkbox"/> Government Entity II. <input type="checkbox"/> International Organisation III. <input type="checkbox"/> Foreign Central Bank IV. <input type="checkbox"/> Exempt Retirement Fund IV. <input type="checkbox"/> Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</p>	
III.	<p><i>Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the Agreement)</i></p> <p><i>Indicate exemption:</i> _____</p>	
IV.	<p><i>Non-Participating Foreign Financial Institution</i></p> <p><i>Indicate exemption:</i> _____</p>	
V.	<p><i>Excepted Foreign Financial Institution</i></p>	
VI.	<p><i>Trustee Documented Trust. Please provide your Trustee's name and GIIN</i></p> <p><i>Trustee's Name:</i> _____ <i>Trustee's GIIN:</i> _____</p>	

3.4 Non-Financial Institutions under FATCA:

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

I.	Active Non-Financial Foreign Entity	
II.	Passive Non-Financial Foreign Entity (Please tick the box that applies) I. Passive Non-Financial Foreign Entity with no Controlling Persons that are specified U.S Persons. <input type="checkbox"/> II. Passive Non-Foreign Financial Entity with Controlling Persons that are specified U.S <input type="checkbox"/> Persons. (If this box is ticked, please indicate the name of all natural Controlling Person(s) of the Entity in section 6.1 below and separately complete	
III.	Excepted Non-Financial Foreign Entity	
IV.	Direct Reporting NFFE Please provide your GIIN: _____	

Section 4: CRS Declaration of Tax Residency (please note that you may choose more than one country)*

(Note that Entities may have more than one country of Tax Residence)

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TIN")). Please refer to the OECD CRS Web Portal for AEOI for more information on Tax Residence.

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

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

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

Country of Tax Residency	Tax ID Number

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

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

- Reason C** - No TIN is required. (Note: Only select this reason if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

Section 5: Entity's CRS Classification*(the information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 3):

In addition please note that the information that the Entity has to provide may differ depending on whether they are resident in a participating or non-participating CRS Jurisdiction. For more information please see the OECD CRS Standard and associated commentary.

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

5.1 Financial Institutions under CRS:

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

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

I.	A Reporting Financial Institution resident in a participating CRS jurisdiction	
II.	<p>A Financial Institution Resident in a Non-Participating Jurisdiction.</p> <p><input type="checkbox"/> An Investment Entity resident in a Non-Participating Jurisdiction and managed by another Financial Institution (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity in section 6 below and complete a separate individual self-certification forms for each of your Controlling Persons")</p> <p><input type="checkbox"/> An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution</p> <p><input type="checkbox"/> Other Financial Institution, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company</p>	
	<p>Non-Reporting Financial Institution under CRS. Specify the type of Non-Reporting Financial Institution below:</p> <p><input type="checkbox"/> Governmental Entity</p> <p><input type="checkbox"/> International Organization</p> <p><input type="checkbox"/> Central Bank</p> <p><input type="checkbox"/> Broad Participation Retirement Fund</p>	

	<input type="checkbox"/> Narrow Participation Retirement Fund <input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank <input type="checkbox"/> Exempt Collective Investment Vehicle <input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts <input type="checkbox"/> Qualified Credit Card Issuer <input type="checkbox"/> Other Entity defined under the domestic law as low risk of being used to evade tax. Specify the type provided in the domestic law: _____	
--	--	--

5.2 Non Financial Institutions under CRS:

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

I.	<i>Active Non-Financial Entity</i> – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation Please provide the name if the established securities market on which the corporation is regularly traded: _____	
II.	Active Non-Financial Entity – if you are a Related Entity of a regularly traded corporation. Please provide the name of the regularly traded corporation that the Entity is a Related Entity of: _____ Please provide details of the securities market that the entity is listed on : _____	
III	<i>Active Non-Financial Entity</i> – a Government Entity or Central Bank	
IV.	<i>Active Non-Financial Entity</i> – an International Organisation	
V.	<i>Active Non-Financial Entity</i> – other than (I)-(III) (for example a start-up NFE or a non-profit NFE)	
VI	<i>Passive Non-Financial Entity</i> (If this box is ticked, please also complete Section 6.1 below and indicate the name of all natural Controlling Person(s) of the Entity and complete a separate Individual Self-Certification Form for each of your Controlling Person(s)	

**** Controlling Persons:**

NB: Please note that each Controlling Person must complete a separate Individual Self-Certification form. If there are no natural person(s) who exercise control of the Entity then the Controlling Person will be the natural person(s) who hold the position of senior managing official of the Entity.

For further information on identification requirements under CRS for Controlling Persons, see the Commentary to Section VII of the CRS Standard

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

Section 6: Controlling Persons

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

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

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 (Controlling Person's) Self-Certification for FATCA and CRS for each Controlling Person listed in Section

Section 7: Declarations and Undertakings

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

I acknowledge 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 undertake to advise the recipient promptly and provide an updated Self-Certification where any change in circumstance 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):* _____

Source of Wealth Declaration - Company

All information provided in this document will remain strictly confidential

Document to be returned by post as original

Name of Company Representative:	
Country of Residence of Representative:	
Company Name:	
Commercial Register No. of Company:	
Issuing Authority:	
Position of Company Representative:	<hr/> <i>As Company Representative please state your position.</i>
I, as Company Representative declare:	<input type="checkbox"/> The represented Company is the ultimate beneficial owner of the monies invested <input type="checkbox"/> The represented Company is not the ultimate beneficial owner of the monies invested, which is <i>(please specify*)</i> : <hr/>
I, as Company Representative further declare:	<p>The monies invested do not originate from criminal activity, of whatever nature, and in particular do not constitute the proceeds of money laundering.</p> <p>Any profits derived from my investment will not be used for terrorism financing.</p>
I, as Company Representative declare that the monies invested are drawn from the Company's bank account and do not come from a third party. These funds originate from the following:	<input type="checkbox"/> Company's funds <input type="checkbox"/> Other <i>(Please specify*)</i> :

**Please be advised, that Société Générale Securities Services, SGSS (Ireland) Limited in their capacity as Registrar and Transfer Agent may request additional information if necessary.*

Signature of Company

Representative.....

Date

Declaration of Residence Outside the Republic of Ireland

Applicants resident outside Ireland are required by the Revenue Commissioners of Ireland 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. Terms used in this declaration are defined in the Prospectus.

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

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

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

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

Declaration of Residence within the Republic of Ireland

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 ('TCA 1997'), being a person who is: (please tick as appropriate).
- A pension scheme
 - A company carrying on life business within the meaning of section 706 TCA 1997
 - An investment undertaking
 - An investment limited partnership
 - A special investment scheme
 - A unit trust to which section 731(5) (a) TCA 1997 applies;
 - A charity being a person referred to in section 739D(6)(f)(i) TCA 1997
 - A qualifying management company
 - Entitled to exemption from income tax and capital gains tax by virtue of section 784A(2) TCA 1997, (see further requirements for Qualifying Fund Manager below)
 - A PRSA Administrator
 - A credit union within the meaning of section 2 of the Credit Union Act 1997

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

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

- i. 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
- ii. 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/ Qualifying Savings Manager/PRSA Administrator

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/a PRSA, 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/a PRSA, 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 declare that I am applying for Shares on behalf of persons who

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

I also declare that

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

Name of applicant: _____

Irish Tax Reference Number of applicant: _____

Authorised Signatory: _____ **(Declarant) (Mr/Ms/etc.)**

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. It is important to note that this Declaration, if it is then still correct, shall apply to any subsequent acquisitions of shares.

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. It must also be signed by a qualifying fund manager of an approved retirement fund/an approved minimum retirement fund or by a PRSA administrator. In the case of an intermediary, the declaration must be signed by the intermediary. In the case of a company, the declaration must be signed by the company secretary or other authorised officer. In the case of a unit trust, it must be signed by the trustees. In any other case, it must be signed by an authorised officer of the entity concerned or a person who holds a power of attorney from the entity. If the latter, a copy of the power of attorney should be furnished in support of this declaration.

Applicants who are resident or ordinarily resident in Ireland are also required to provide one of the following documents to verify the Tax Identification 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 the applicant's name, address and tax reference number will also be acceptable.

APPENDIX 1

CRS Customer Information Notice

The CRS was developed by the OECD as a new global standard for the automatic exchange of information between tax authorities in participating jurisdictions. A Multilateral Competent Authority Agreement was signed on 29 October 2014 in Berlin at the Global Forum on Transparency and Exchange of Information which will implement CRS in more than 90 jurisdictions, including Ireland. Under the CRS, governments of participating jurisdictions are required to collect detailed information to be shared with other jurisdictions annually. A group of over 40 countries, including Ireland, have committed to the early adoption of the CRS from 1 January 2016 with the first data exchanges taking place in September 2017. All EU member states, except Austria, introduced the CRS from 1 January 2016; Austria will introduce CRS from 1 January 2017.

Under Irish laws giving effect to the CRS, the Fund will be required to obtain and report to the Revenue Commissioners annually certain financial account and other information for all new and existing Shareholders in respect of their holding of Shares in the Fund. This information will include amongst other things, details of the name, address, TIN, place of residence and, in the case of Shareholders who are individuals, the date and place of birth, together with details relating to payments made to Shareholders and their holdings. All Shareholders will be required to provide this information to the Fund.

This information is being collected and reported to the Revenue Commissioners by the Fund to enable the Revenue Commissioners to exchange this information with tax authorities in participating jurisdictions who have signed up to the Multilateral Competent Authority Agreement. Presently, the Fund will be required to collect and report this information in respect of all Shareholders in the Fund, irrespective of where they are resident. It is expected that where a Shareholder is resident in a jurisdiction which is participating in the CRS, the information submitted by the Fund to the Revenue Commissioners will be shared by the Revenue Commissioners with the tax authority of that participating jurisdiction. It is expected that where the Revenue Commissioners determine that a Shareholder is resident in a non-participating jurisdiction, no further use will be made by the Revenue Commissioners of the information submitted by the Fund. The precise requirements of the CRS as implemented in Ireland are not yet known and may impose additional due diligence, systems and administrative burdens and costs on the Fund and/or its Shareholders. Further information may be obtained from the AEOI (Automatic Exchange of Information) webpage on revenue.ie - <http://www.revenue.ie/en/business/aeoi/index.html>.

APPENDIX 2

Privacy Notice

Introduction

This document refers to personal data, which is defined as information concerning any living person (a natural person who hereafter will be called the Data Subject) that is not already in the public domain.

The General Data Protection Regulation (GDPR) seeks to protect and enhance the rights of data subjects. These rights cover the safeguarding of personal data, protection against the unlawful processing of personal data and the unrestricted movement of personal data within the EU. It should be noted that GDPR does not apply to information already in the public domain.

The ICAV is pleased to provide the following Privacy Notice:

Personal Data

The ICAV uses the information collected from you to provide financial services. In making initial contact you consent to Treasury Capital Fund Solutions as the Management Company maintaining a dialogue with you until you either opt out (which you can do at any stage) or we decide to desist in promoting our services.

Any information Treasury Capital Fund Solutions holds about you or your business encompasses all the details we hold about you and any financial, employee records and KYC information.

Treasury Capital Fund Solutions will only collect the information needed so that it can provide you with financial services.

In order to meet its contractual obligations, Treasury Capital Fund Solutions utilises the following third parties:

Organisation	Service Description
Société Générale Dublin Branch	Third party Administration Services System provision
McCann Fitzgerald	Legal
HMP Secretarial Limited	Company Secretary for the ICAV Board of Director
Deloitte	Auditors

Treasury Capital Fund Solutions, will ensure that the organisations detailed above are fully GDPR compliant.

Legal basis for processing any personal data

To meet Treasury Capital Fund Solutions contractual obligations to the ICAV and its clients and to also respond to marketing enquiries.

Consent

Through agreeing to this privacy notice you are consenting to Treasury Capital Fund Solutions processing your personal data for the purposes outlined. You may withdraw consent at any time by emailing Dataprotection.sgssireland@sgss.socgen.com or writing to us, see last section for full contact details.

Disclosure

Treasury Capital Fund Solutions may on occasions pass your Personal Information to third parties exclusively to process work on its behalf. Treasury Capital Fund Solutions requires these parties to agree to process this information based on our instructions and requirements consistent with this Privacy Notice and GDPR.

Treasury Capital Fund Solutions do not broker or pass on information gained from your engagement with them without your consent. However, Treasury Capital Fund Solutions may disclose your Personal Information to meet legal obligations, regulations or valid governmental request. Treasury Capital Fund Solutions may also enforce its Terms and Conditions, including investigating potential violations of its Terms and Conditions to detect, prevent or mitigate fraud or security or technical issues; or to protect against imminent harm to the rights, property or safety of Treasury Capital Fund Solutions, its clients and/or the wider community.

Retention Policy

Treasury Capital Fund Solutions will process personal data during the duration of any contract and will continue to store only the personal data needed for ten years after the contract has expired to meet any legal obligations.

Data storage

Data is held in the UK and may at third party locations using different (multiple) servers.

Your rights as a data subject

At any point whilst Treasury Capital Fund Solutions is in possession of or processing your personal data, all data subjects have the following rights:

- **Right of access** – you have the right to request a copy of the information that we hold about you.
- **Right of rectification** – you have a right to correct data that we hold about you that is inaccurate or incomplete.
- **Right to be forgotten** – in certain circumstances you can ask for the data we hold about you to be erased from our records.
- **Right to restriction of processing** – where certain conditions apply you have a right to restrict the processing.
- **Right of portability** – you have the right to have the data we hold about you transferred to another organisation.
- **Right to object** – you have the right to object to certain types of processing such as direct marketing.
- **Right to object to automated processing, including profiling** – you also have the right not to be subject to the legal effects of automated processing or profiling.

In the event that Treasury Capital Fund Solutions refuses your request under rights of access, we will provide you with a reason as to why, which you have the right to legally challenge.

Treasury Capital Fund Solutions at your request can confirm what information it holds about you and how it is processed

You can request the following information:

- Identity and the contact details of the person or organisation (Treasury Capital Fund Solutions) that has determined how and why to process your data.
- Contact details of the data protection Champion, where applicable.
- The purpose of the processing as well as the legal basis for processing.
- If the processing is based on the legitimate interests of Treasury Capital Fund Solutions or a third party such as one of its clients, information about those interests.

- The categories of personal data collected, stored and processed.
- Recipient(s) or categories of recipients that the data is/will be disclosed to.
- How long the data will be stored.
- Details of your rights to correct, erase, restrict or object to such processing.
- Information about your right to withdraw consent at any time.
- How to lodge a complaint with the supervisory authority (Data Protection Regulator).
- Whether the provision of personal data is a statutory or contractual requirement, or a requirement necessary to enter into a contract, as well as whether you are obliged to provide the personal data and the possible consequences of failing to provide such data.
- The source of personal data if it wasn't collected directly from you.
- Any details and information of automated decision making, such as profiling, and any meaningful information about the logic involved, as well as the significance and expected consequences of such processing.

To access what personal data is held, identification will be required

Treasury Capital Fund Solutions will accept the following forms of ID when information on your personal data is requested: a copy of your national ID card, driving license, passport, birth certificate and a utility bill not older than three months. A minimum of one piece of photographic ID listed above and a supporting document is required. If Treasury Capital Fund Solutions is dissatisfied with the quality, further information may be sought before personal data can be released.

All requests should be made to Dataprotection.sgssireland@sgss.socgen.com writing to us at the address further below.

Complaints

In the event that you wish to make a complaint about how your personal data is being processed by Treasury Capital Fund Solutions or its partners, you have the right to complain to Treasury Capital Fund Solutions at the below contact details. If you do not get a response within 30 days you can complain to the Data Protection Regulator (ICO).

Rights to be forgotten and Rectification

In the event that you wish to exercise your to erasure or rectification of the personal data being processed by Treasury Capital Fund Solutions or its partners, you should write to us or email per the below contact details.

Treasury Capital Fund Solutions
 C/O – Societe Generale Securities Services
 SGSS (Ireland) Limited, 3rd Floor
 IFSC House, IFSC
 Dublin 1
Dataprotection.sgssireland@sgss.socgen.com



EVENLODE

SUBSCRIPTION / REDEMPTION FORM

Please return to:

Evenlode ICAV c/o The Administrator, Société Générale Securities Services, SGSS
(Ireland) Limited
3rd Floor
IFSC House,
IFSC,
Dublin 1
Ireland
Phone: +353 (0)1 6750 300
Fax: +353 (0)1 6750 351
Email: Service.Ta-Dublin@sgss.socgen.com

REGISTERED INFORMATION

Shareholder Name

Account Number

DEAL INSTRUCTIONS

Please note the currency of subscription or redemption must be the same as the currency of the share class being dealt.

Evenlode ICAV – Evenlode Global Income Feeder Fund (the "Fund")			
Share Class	Currency	No of Shares (if known)	Gross Investment Amount

Amount to be invested

Amount to be redeemed

Amount in words

SUBSCRIPTION INSTRUCTIONS

Pay to:

GBP Payment Details

GBP Corresponding Bank:	BARCLAYS BANK LONDON
GBP Bank Swift	BARCGB22
Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5038 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0503 8031 3969 942
Beneficiary Account Name	EVENLODE GLOBAL INCOM FE FD COLL

Euro Payment Details

Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5000 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0500 0031 3969 961
Beneficiary Account Name	EVENLODE GLOBAL INCOM FE FD COLL

USD Payment Details

USD Corresponding Bank:	Société Générale (New York)
USD Bank Swift	SOGUES33
Beneficiary Bank	Société Générale (PARIS)
Beneficiary Swift	SOGEFRPPAFI
Beneficiary Account number	0560 5030 0313 9699
Beneficiary Account IBAN	FR76 3000 3056 0503 0031 3969 946
Beneficiary Account Name	EVENLODE GLOBA IN FE FD COL

REDEMPTION INSTRUCTIONS

Name of Bank _____
A/c Name _____ A/c Number _____
Address of Bank _____
Sort Code _____
Swift Code _____ ABA Number _____
IBAN _____

Please note:

Monies must originate from the account of the investor. Failure to complete these details accurately and in accordance with the original signed Application Form and forward monies within the settlement time scale will result in the loss of good value and an interest claim from the relevant Fund. Redemptions from Euro Shares will be made in Euro, redemptions from GBP Shares will be made in GBP and redemptions from USD Shares will be made in USD.

I/We confirm that I/we have the authority to make this investment.

I/We hereby agree to indemnify and hold harmless the Investment Manager, the Manager, the Administrator, the Distributor(s) or the ICAV and their respective directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the relevant Fund. The Investment Manager, the Manager, the Administrator, the Distributor(s) or the ICAV will not be responsible or liable for the authenticity of instructions received from me/us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed to be genuine.

Authorised Signatories

Signature

Print name

Signature

Print name

Date _____