

Apsley Fund ICAV  
 c/o Northern Trust International Fund Administration Services (Ireland) Limited  
 Transfer Agency Dept.  
 George's Court  
 54-62 Townsend Street  
 Dublin 2  
 Ireland  
 Tel: +353 1 434 5118 Fax: +353 1 434 5284

***Apsley Fund ICAV  
 Application Form***

*In order to open an account in **Apsley Fund ICAV** (the "**Company**") this form should be completed then sent by fax to the above number. The original document should be sent to the above address together with the required documentation. This form can facilitate multiple bank details (e.g. for different currencies).*

Unless defined elsewhere in this Application Form, all capitalised terms used shall have the meanings given to them in the prospectus of the Company and each supplement for the relevant sub-funds of the Company (each a "**Fund**"), as may be amended from time to time, (collectively the "**Prospectus**").

Neither the Prospectus nor this Application Form constitutes an offer or solicitation to anyone in any state of the United States or in any other jurisdiction in which such offer or solicitation is not authorised.

I/We agree to be bound by the representations and statements set out in this Application Form.

For any KIID related queries, please contact Colm Devaney, Northern Trust ([cd122@ntrs.com](mailto:cd122@ntrs.com)).

Please ensure that you have read the Prospectus and the Key Investor Information Document (the "KIID") before completing this Application Form. The KIID is available for all sub-funds at the Investment Manager's website [www.optima.com](http://www.optima.com).

**PLEASE NOTE THAT IF YOU ARE A U.S. PERSON OR ENTITY, YOU SHOULD COMPLETE THE SUBSCRIPTION BOOKLET FOR UNITED STATES INVESTORS AND NOT THIS FORM. A COPY OF THE SUBSCRIPTION BOOKLET FOR UNITED STATES INVESTORS CAN BE OBTAINED FROM APSLEY FUND ICAV, c/o NORTHERN TRUST INTERNATIONAL FUND ADMINISTRATION SERVICES (IRELAND) LIMITED, TRANSFER AGENCY DEPT., GEORGE'S COURT, 54-62 TOWNSEND STREET, DUBLIN 2, IRELAND (Tel: +353 1 434 5118 Fax: +353 1 434 5284) OR FROM OPTIMA FUND MANAGEMENT LLC, 10 EAST 53<sup>RD</sup> STREET, NEW YORK, NY 10022 (Tel: +1 212 484 3000 Fax: +1 212 484 3001)**

<b>Account Name:</b>
<b>Full Name of Applicant:</b>

<b>Registered/Permanent Address:</b>	<b>Correspondence Address: (if different)</b>
<b>Phone Number:</b>	<b>Phone Number:</b>
<b>Fax Number:</b>	<b>Fax Number:</b>
<b>Contact Name:</b>	<b>Contact Name:</b>
<b>E-mail address:</b>	

Northern Trust International Fund Administration Services (Ireland) Limited must receive this Application Form by 16:00 (Irish time) at least two (2) Business Days prior to the relevant Dealing Day. Payment for subscriptions should be received no later than 16.00 (Irish time) one (1) business day prior the relevant Dealing Day.

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Dealing Date:	Settlement Date:
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Dealing instructions can also be accepted by other electronic means. A list of authorised persons with contact details would be required, as follows. **The original instruction must follow in the post to the above address.**

Account Name	Authorised Person	Telephone number

**AGENT DETAILS:**

<b>Agent Name:</b>
--------------------

<b>Address:</b>	<b>Agency Stamp</b>
<b>Fax Number:</b>	<b>Agency Number:</b>
<b>Contact Name:</b>	<b>Regulator:</b>
<b>VAT Registration No:</b>	<b>Regulator Approval No:</b>
<b>E-mail address:</b>	

I/We hereby apply for such number of Shares at the subscription price calculated in accordance with the Articles in each of the following Fund(s) as may be subscribed for with the amount indicated below:

Subscription monies will be for the account of the relevant Fund

Fund Name	Fund Code	Monetary Amount	Payment Currency	Minimum Initial Amount
Optima Star Fund Class A			EUR	€5,000
Optima Star Fund Class B			USD	\$5,000
Optima Star Fund Class C			CHF	CHF5,000
Optima Star Fund Class G			EUR	€250,000
Optima Star Fund Class H			USD	\$250,000
Optima Star Fund Class I			CHF	CHF250,000
Fund Name	Fund Code	Monetary Amount	Payment Currency	Minimum Amount

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Optima Star Long Fund Class A			EUR	€5,000
Optima Star Long Fund Class B			USD	\$5,000
Optima Star Long Fund Class C			CHF	CHF5,000
Optima Star Long Fund Class G			EUR	€250,000
Optima Star Long Fund Class H			USD	\$250,000
Optima Star Long Fund Class I			CHF	CHF250,000

**Anti-dilution Fees**

Please indicate the code to detail which entry charge should be applied to this subscription/redemption. Please contact the Investment Manager for more details.

Code	
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**Bank Account Details for Redemption Payments (to be completed by the Investor)**

	<b>EUR</b>
<b>Intermediary Bank</b>	
<b>Name of Bank</b>	
<b>Swift code</b>	
<b>Sort Code/ABA No.</b>	
<b>Account Number</b>	
<b>Account Name</b>	
<b>Address of Bank Branch (including country)</b>	
<b>Reference</b>	

	<b>USD</b>
<b>Intermediary Bank</b>	
<b>Name of Bank</b>	
<b>Swift code</b>	
<b>Sort Code/ABA No.</b>	
<b>Account Number</b>	
<b>Account Name</b>	
<b>Address of Bank Branch (including country)</b>	
<b>Reference</b>	

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	<b>CHF</b>
<b>Intermediary Bank</b>	
<b>Name of Bank</b>	
<b>Swift code</b>	
<b>Sort Code/ABA No.</b>	
<b>Account Number</b>	
<b>Account Name</b>	
<b>Address of Bank Branch (including country)</b>	
<b>Reference</b>	

All proceeds will be paid to the above accounts.

**NOTE: NO THIRD PARTY PAYMENTS WILL BE UNDERTAKEN.**

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

**All subscription payments should be made to the following bank accounts**

	<b>EUR</b>
<b>Name of Bank</b>	Barclays Bank PLC, London
<b>Swift code</b>	BARCGB22
<b>Address</b>	1 Churchill Place London EC14 5HP
<b>Account Number</b>	
<b>Account Name</b>	The Northern Trust International Banking Corporation, New Jersey - CNORUS33
<b>For further credit to account number:</b>	638296-20019
<b>For further credit to account name:</b>	Apsley Fund ICAV
<b>Reference</b>	Apsley Fund ICAV & investor account number

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	<b>CHF</b>
<b>Name of Bank</b>	Credit Suisse AG, Zurich
<b>Swift code</b>	CRESCHZZ80A
<b>Address</b>	Paradeplatz 8 CH-8070 Zurich Switzerland
<b>Account Number</b>	
<b>IBAN</b>	CH1004835098499033010
<b>Account Name</b>	The Northern Trust International Banking Corporation, New Jersey - CNORUS33
<b>For further credit to account number:</b>	638304-20019
<b>For further credit to account name:</b>	Apsley Fund ICAV
<b>Reference</b>	Apsley Fund ICAV & <i>investor account number</i>

	<b>USD</b>
<b>Name of Bank</b>	The Northern Trust International Banking Corporation, New Jersey
<b>Fedwire ABA</b>	026001122
<b>CHIPS ABA</b>	0112
<b>Swift code</b>	CNORUS33
<b>Address</b>	Harborside Financial CTR, Plaza 10, Suite 1401 3 Second Street Jersey City, NJ - 07311-3988
<b>Account Number</b>	
<b>Account Name</b>	The Northern Trust International Banking Corporation, New Jersey – CNORUS33
<b>For further credit to account number:</b>	147611-20010
<b>For further credit to account name:</b>	Apsley Fund ICAV
<b>Reference</b>	Apsley Fund ICAV & <i>investor account number</i>

**Note: Currency Subscription Settlement times:**  
**EUR 14:00 GMT;**  
**USD 17:00 GMT;**  
**CHF 14:30 GMT -1 DAY**

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### **Supplemental Investor Identification Information for AML/CTF Purposes**

In accordance with the Anti-Money Laundering and Counter Terrorist Financing ("AML/CTF") measures as disclosed in the Prospectus, please complete the applicable sections below and provide the relevant identity verification documentation.

#### **Anti-Money Laundering Documentary Requirements**

**Apsley Fund ICAV**  
**Anti-Money Laundering Verification Requirements in accordance with**  
**The Criminal Justice (Money Laundering and Terrorist Financing) Act, 2010, as amended**

#### **Guide to completing this form.**

- **Part I** This section must be completed by all applicants and transferees
- **Part II** This section should be completed by any applicant which is a Recognised Regulated Entity; e.g. a bank, provider of financial services or nominee company acting on its own account and if authorised and regulated in a Prescribed Country i.e. Australia, Austria, Belgium, Brazil, Bulgaria, Canada, Channel Islands, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hong Kong, Hungary, Iceland, India, Ireland, Isle of Man, Italy, Japan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Mexico, Netherlands, Norway, Poland, Portugal, Romania, Singapore, Slovakia, Slovenia, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom, The Dutch overseas territories of Netherlands Aruba, Curacao, Sint Maarten, Bonaire, Sint Eustatius and Saba. The French overseas territories of Mayotte, New Caledonia, French Polynesia, Saint Pierre and Miquelon and Wallis & Futuna .
- **Part III** This section is only applicable to **individual & joint account investors** investing directly into the Fund, i.e. not through an intermediary
- **Part IV** This section is to be completed if an **unregulated Nominee Company** is acting as nominee for investors, the Nominee Company is owned by a Recognised Regulated Entity and the Nominee Company's name appears on the shareholder register
- **Part V** This section is applicable to **Politically Exposed Persons** investing into the Fund.
- **Part VI** This section is applicable to **other investors** investing directly into the Fund.

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

**PART I – ALL\***

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

Mr/Mrs/Miss/Ms/Company Name: \_\_\_\_\_

Address/Registered Office: \_\_\_\_\_

\_\_\_\_\_

Date of Birth <sup>1</sup>(if applicable): \_\_\_\_\_

Country of Birth/Registration: \_\_\_\_\_

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

1. \_\_\_\_\_ 2. \_\_\_\_\_

3. \_\_\_\_\_ 4. \_\_\_\_\_

\_\_\_\_\_

<sup>1</sup> Must be over 18 years of age.

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**Note: If there are no beneficial owners please check the box below**

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

**Date:** \_\_\_\_\_

<b>Signed:</b>	<b>1.</b>	<b>2.</b>	<b>3.</b>	<b>4.</b>	<b>Signatory capacity if applicable (i.e. Director/manager)</b>
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____
	_____	_____	_____	_____	_____

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

**PART II – Recognised Regulated Entities**

**Please tick the following box, if appropriate:**

The applicant is a Recognised Regulated Entity (as previously defined) acting on its own account

YES

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

\_\_\_\_\_

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

**PART III - Individuals and Joint Account Holders**

**Please supply the following documents.**

**In the case of joint account holders, please supply the relevant documentation in respect of all holders.**

- A copy photographic identity document and
- Two copies of non-photographic identity documents.

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

**PART IV – If Nominee Company is unregulated-is acting as nominee for investors-the nominee company is owned by a Recognised Regulated Entity and the name of the Nominee Company appears on the Shareholder Register**

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

1. Standard reliance letter (Appendix 3 and 4)
2. Proof of regulatory status of Recognised Regulated Entity **or**
3. Documentation in accordance with the legal form of the Nominee Company

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**PART V – Politically Exposed Persons**

Please confirm whether you are a **Politically Exposed Person (PEP)** YES:  NO:

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

**Required Identity Verification Documentation**

**Individual - please provide**

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

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

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

**A. Source of Funds**

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

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



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## **B. Source of Wealth**

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

## **PART VI – OTHER INVESTORS (Standard Customer Due Diligence)**

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

### **Listed Company**

For a Listed Company in a Prescribed Country Proof of Listing on a recognised stock exchange in a Prescribed Country and Authorised Signatory List. Otherwise see 1- 10 below.

1. Proof of listing of the company.
2. Full name of the company.
3. Registered number of the company.
4. Registered office address of the company.
5. Principal business address of the company.
6. Details of Directors of the company.
7. Identify any beneficial owners who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company. Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
8. Receive confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify any Beneficial Owner
9. Verification of identity of Company from:
  - Search of the relevant company registry; or
  - Copy of Certificate of incorporation or equivalent; or
  - Copy of Memorandum and Articles of Association or equivalent; or
  - Copy of latest audited financial statements.
10. Authorised signatory list.

### **Subsidiary of a Listed Company**

1. Full name of the subsidiary company.
2. Registered number of the subsidiary company.
3. Registered office address of the subsidiary company.
4. Principal business address of the subsidiary company.
5. Details of Directors of the company.
6. Identify any Beneficial Owner beneficially entitled to more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form.

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

7 Receive confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify any Beneficial Owner.

8 Verification of identity of the subsidiary company from:

< Search of the relevant company registry; or

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- < Copy of Certificate of incorporation or equivalent; or
- < Copy of Memorandum and Articles of Association or equivalent; or < Copy of latest audited financial statements.

### **Private and Unlisted Company**

1. Full name of the company.
2. Registered number of the company.
3. Registered office address of the company.
4. Principal business address of the company.
5. Details of directors of the company.
6. Verify the identity of two directors or one director and one authorised signatory (If individuals, one proof of ID and one proof of address is required).
7. Identify any beneficial owners who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company.  
Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
8. Verification of identity from
  - Search of the relevant company registry; or
  - Copy of Certificate of incorporation or equivalent; or
  - Copy of Memorandum and Articles of Association or equivalent; or
  - Copy of audited financial statements.
9. Authorised signatory list.

### **Partnership**

1. Full name of the partnership.
2. Registered office address and principal business address of the partnership.
3. Where not a Partnership Fund, identify all partners, verify the identity of two partners or one partner and one authorised signatory and identify any partners who own more than 25% of the partnership capital, profit or voting rights or otherwise exercise control over the management of the partnership; or
4. If a Partnership Fund, identify and verify the identity of the General Partner, identify all partners, verify the identity of two partners or one partner and one authorised signatory and identify any partners who own more than 25% of the partnership capital, profit or voting rights or otherwise exercise control over the management of the Partnership Fund. (If individuals, one proof of ID and one proof of address is required)  
Note: Where the beneficial owner is a corporate entity, Northern Trust requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
5. Constitutional Document (e.g. Partnership Agreement).
6. Authorised signatory list.

### **Limited Liability Company**

1. Full name of the LLC.
2. Registered office address of the LLC.
3. Principal business address of the LLC.  
Identify all Managing Members, verify the identity of two Managing Members or one Managing Member and one authorised signatory and identify any Member beneficially entitled to more than 25% of the entity's share capital or otherwise exercise control over the management of the entity. Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
4. Constitutional Document (e.g. Certificate of formation).
5. Operating agreement.
6. Authorised signatory list.

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### **Collective Investment Scheme**

1. Full name of CIS.
2. Registered address of CIS.
3. Prospectus or equivalent.
4. Name and address of scheme promoter.
5. Name and address of scheme administrator.
6. Name and address of entity carrying out anti-money laundering checks upon the scheme investors and confirmation that entity is regulated for AML purposes.
7. Identify any investors who own more than 25% of the share capital.
8. Authorised signatory list.

### **Trust, Foundation or similar entity**

1. Full name of trust, foundation or similar entity.
2. Registered address of trust, foundation or similar entity.
3. Legal form of the trust, foundation or similar entity.
4. Trust deed or equivalent or confirmation of the entity to an appropriate register.
5. Nature / purpose of the Trust, foundation or similar entity.
6. Details of all trustees
7. Verification of identity of two trustees or one trustee and one authorised signatory (if individuals, one proof of ID and one proof of address is required).
8. Identify any beneficial owners who own more at least 25% of the share capital or voting rights or otherwise exercises control over the trust.  
Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
9. Details of settler.
10. Details of protector (as appropriate).
11. Authorised signatory list.

### **General Pension Scheme**

1. Full name of the pension scheme.
2. Registered office address of the pension scheme.
3. Authorised signatory list of the controllers of the pension scheme.
4. Confirmation of registration (as appropriate) from the relevant tax authorities or pension's board or items 5 and 6 below.
5. Verification of identity of two Trustees / Directors/Governors/Board Members or one Trustee/ Director/Governor/ Board Member and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
6. Constitutional/Formation Document (e.g. Trust Deed).

### **Charity**

Extract from the relevant Charities Register e.g. UK Charities Commission or 1- 9 below.

1. Full name of the charity.
2. Nature/purpose including the nature of the funding of the charity.
3. Registered office address of the charity.
4. Principal business address of the charity.
5. Details of Trustees/Directors/ Governors/Board Members or equivalent.
6. Verification of identity of two Trustees / Directors/Governors/Board Members or one Trustee/ Director/Governor/ Board Member and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
7. Details of beneficiaries (where ascertainable).
8. Constitutional/Formation Document for the charity
9. Authorised signatory list.

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### **Government / Public Body**

For a Government/Public Body in a Prescribed Country background from a reliable source (e.g. internet search) and Authorised Signatory List. Otherwise see 1- 9 below.

1. Full name of the government/public authority.
2. Nature and status the government/public authority.
3. Registered office address of the government/public authority.
4. Name of the home state authority and nature of its relationship with the government/public authority.
5. Ownership of the government/public authority.
6. Names of main public body officials.
7. Identify all persons who own or control over 25% of the entity's share capital, profit or voting rights or otherwise exercises control over the management of the entity.  
Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.).
8. Authorised signatory list.
9. Appropriate background information on the entity (e.g. via internet search).

### ***Representations & Warranties***

#### **Please note the following important provisions**

Please delete any statement which is not relevant to you

*\* Please delete as appropriate*

1. I/We\* confirm that I am/we are\* 18 years of age or over. – *Please delete if you are not a natural person.*
2. If you are joint applicants – we direct that, on the death of one of us, the Shares for which we are applying shall be held in the name of and to the order of the survivor(s) or the executor(s) or administrator of the last such survivor. – *Please delete if you are not a natural person or a sole investor.*
3. I/We\* confirm that I am/we are\* not a US Person (as defined in the Prospectus) and am/are\* not acquiring Shares on behalf of, or for the benefit of, a US Person, nor do I/we\* intend transferring any Shares which I/we\* may purchase to any person who is a US Person.
4. I/We\* indemnify and hold harmless the Company, Investment Manager, Depositary, Administrator and all of their respective officers, employees, directors, partners, agents, legal representatives and controlling persons and other shareholders ("**Indemnitees**") against any loss, expense, judgment, settlement cost, fee and related expenses (including attorneys' fees and expenses) due to or arising out of a breach of any representation, warranty or agreement by me/us contained herein or in any other document provided by me/us to the Company or any of its service providers in connection with this investment. I/we hereby agree to indemnify the Indemnitees, and to hold them harmless against all liabilities, costs or expenses (including attorneys' fees) arising as a result of the sale or distribution of the Shares by me/us in violation of any applicable law, including any applicable anti-money laundering laws and regulations operating within the respective jurisdictions, or any misrepresentation or breach by the us/we with respect to the matters set forth herein. In addition, I/we agrees to indemnify the Indemnitees and to hold such persons and firms harmless from and against, any and all loss, damage, liability or expense, including costs and attorneys' fees, to which they may be put or which they may incur or sustain by reason of or in connection with any misrepresentation made by the me/us with respect to the matters about which representations and warranties are required by the terms hereof or any breach of any such representations and warranties or any failure to fulfil any covenants or agreements set forth herein or included in and as defined in the Prospectus.
5. I/We\* have received and considered a copy of the Prospectus dated [●] and confirm that this application is based solely on the Prospectus for the Company current at the date of this application and the material contracts referred to in the Prospectus together (where applicable) with the most recent annual report and accounts of the Company and (if issued after such report and accounts) its most recent unaudited semi-annual report.
6. I/We\* represent and warrant that either (i) I/we are not purchasing the Shares with the assets of any employee benefit plan subject to U.S. Employee Retirement Income Security Act of 1974, as amended ("**ERISA**") or a plan subject to Section 4975 of the Internal Revenue Code or other similar law or (ii) the use of such assets to acquire the Shares does not constitute a non-exempt prohibited transaction for purposes of ERISA and Section 4975 of the Internal Revenue Code.
7. I/We\* (if an entity) were not formed, and are not being utilized, primarily for the purpose of making an investment in the Fund.
8. I/We\* undertake to observe and be bound by the provisions of the Memorandum of Association and Articles of Association

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George's Court  
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- (as amended from time to time) constituting the Company and apply to be entered in the register of shareholders as the holder/holders of the Shares issued in relation to this application.
9. (a) The Administrator, the Investment Manager and the Company are each authorised and instructed to accept and execute any instructions in respect of the Shares to which this Application Form relates given by me/us in written form, by facsimile or by other electronic means.  
(b) I/We\* agree to indemnify each of the Administrator, the Investment Manager, and the Company and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any of them acting upon facsimile and/or electronic means. In circumstances where such instructions relate to a change in the bank account details for redemption payments referred to above, I/we\* confirm that I/we\* will provide you with an original instruction.  
(c) The Administrator, the Investment Manager and the Company may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.
  10. I/We acknowledge the Administrator will refuse to process a redemption request on non-cleared / verified accounts.
  11. (a) I/We\* acknowledge that due to applicant identity verification requirements operating within their respective jurisdictions, the Administrator, the Investment Manager and the Company (as the case may be) may require further identification of the applicant(s) before the application can be processed.  
(b) The Administrator, the Investment Manager, and the Company 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 have not been provided by me/us.
  12. I/We\* confirm that I/we\* have the capacity and am/are\* duly authorised to make this application and to make the representations and give the indemnities referred to in this Application Form.
  13. I/We\* request that the Shares issued pursuant to this Application Form are registered in the name and address set out on page 1 hereof.
  14. I/We\* accept such lesser number of Shares if any, than may be specified above in respect of which this application may be accepted.
  15. I/We\* agree to provide these representations to the Company at such times as the Company may request, and (ii) to provide on request such certifications, documents or other evidence as the Company may reasonably require to substantiate such representations.
  16. I/We\* agree to notify the Company immediately if I/we\* become aware that any of the representations made is no longer accurate and complete in all respects. I/We agree immediately either to sell or to tender to the Company for redemption of a sufficient number of Shares to allow the representations to be made again.
  17. I/we confirm that I/we have received and read a copy of the KIID for the sub-fund and/or share classes to which this subscription relates in good time prior to completing this subscription form. I/we hereby confirm that for any subsequent investments, I/we will obtain and read the latest version of the relevant KIID prior to each subscription.
  18. I/we acknowledge and agree that the KIID for each sub-fund and/or share class is available at the Investment Manager's website [www.optima.com](http://www.optima.com) and I/we hereby agree to its receipt in that form. I/we confirm that I/we will read and review the most up-to-date version of the relevant KIID prior to subscription.
  19. I/We acknowledge and agree that other than as set forth in the Prospectus, I/we are not relying upon any other information, representation or warranty by the Company. I/we have consulted, to the extent deemed appropriate by me/us, with my/our own advisors as to the financial, tax, legal and related matters concerning an investment in Shares and on that basis believe that an investment in the Shares is suitable and appropriate for me/us.

### **Irish Residency**

1. Every applicant applying for Shares on the applicant's own behalf is hereby obliged to notify the Company or an agent of the Company appointed for this purpose (as the case may be) in writing if the applicant is or becomes resident or ordinarily resident in Ireland. An individual is ordinarily resident in Ireland if the individual has been resident in Ireland for each of the three preceding years of assessment (ie calendar years) and that individual continues to be ordinarily resident in Ireland until the individual has not been resident in Ireland in each of the three preceding years of assessment.
2. Every applicant applying for Shares on behalf of another person is hereby obliged to notify in writing the Company or an agent of the Company appointed for this purpose (as the case may be) if the applicant is, or becomes, aware that any person who is beneficially entitled to any of those Shares may be resident or ordinarily resident in Ireland or may have become resident in Ireland. An individual is ordinarily resident in Ireland if the individual has been resident in Ireland for each of the three preceding years of assessment (ie calendar years) and that individual continues to be ordinarily resident in Ireland until the individual has not been resident in Ireland in each of the three preceding years of assessment.
3. Every applicant applying for Shares who provides the Company or an agent of the Company appointed for this purpose (as the

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case may be) with an address in Ireland or details of any Irish situate bank account will (for Irish tax purposes) be treated by the Company as Irish resident unless the applicant provides the Company with a signed non-resident declaration confirming residence outside of Ireland. In such instances, the Company may be obliged to deduct Irish tax on certain events with respect to the applicant's Shares, as described in more detail in the Prospectus.

#### **Data Protection**

- A. I/We\* acknowledge that the Company is the data controller and hereby consent to the Company and its delegates or their duly authorised agents and any of their respective related, associated or affiliated companies obtaining, holding, using, disclosing and processing my data:
- To establish my/our\* identity and manage and administer my/our\* holding in the Company and any related accounts on an ongoing basis;
  - For any other specific purposes where I/we\* have given specific consent to do so;
  - To comply with legal, tax or regulatory requirements applicable to the Company or me/us\*;
  - For disclosure or transfer, whether in Ireland or countries outside of the EEA including without limitation the United States of America, which may not have the same data protection laws as Ireland, to third parties including my/our\* financial adviser (where appropriate), regulatory bodies, tax authorities, auditors, technology providers or to the Company and its delegates and its or their duly appointed agents and any of their respective related, associated or affiliated companies for the purposes specified above; and
  - For other legitimate business interests of the Company
- B. I/We\* hereby acknowledge my/our\* right of access to and the right to rectify my/our\* personal data.
- C. I/We\* consent to the recording of telephone calls made to and received from me/us\* by the Investment Manager, its delegates, its duly appointed agents and any of their respective related, associated or affiliated companies for record keeping, security and/or\* training purposes. I/We\* consent to the sending by the Investment Manager of information about other investment services to me/us\*, by letter, telephone or other reasonable means of communication. Please tick box if you do not wish to receive such communications.

In particular, in order to comply with the Standard for Automatic Exchange of Financial Account Information in Tax Matters published by the Organisation for Economic Co-Operation and Development ("OECD") (including any OECD commentary thereon) (the "Standard"), and any treaty law, regulation or other official guidance which facilitates the implementation of the Standard ("CRS") (as implemented in Ireland by Section 891F and Section 891G of the Taxes Consolidation Act, 1997 of Ireland (as amended) and regulations made pursuant to those Sections), your personal data (e.g. name, address, taxpayer identification number, jurisdiction of residence and, in the case of individual investors, place and date of birth) (including financial information with respect to your interest in the Shares (e.g. account number, account balance or value at year end and payments made with respect to the account during the calendar year)) may be shared with the Irish Revenue Commissioners. The Irish Revenue Commissioners may, in turn, exchange this information with foreign tax authorities (including foreign tax authorities located outside the EEA). Please consult the AEOI (Automatic Exchange of Information) webpage on the Irish Revenue Commissioners' website at <http://www.revenue.ie/en/business/aeoi/index.html> for further information in this regard.

*These paragraphs are relevant to entities and natural persons with obligations under the Irish Data Protection Act 1988, as amended by the Data Protection (Amendment) Act 2003 (the "Irish Data Protection Acts").*

We acknowledge that if we process personal data passed to us by the Administrator or if we pass the Administrator personal data as a result of this Application Form, we will comply with the requirements of the Irish Data Protection Acts and the UK Data Protection Act 2003.

It is our policy to take reasonable steps to procure that our customers have the right to request not to receive information about other products and services which we offer.

#### **FATCA and CRS**

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- I/We shall provide the Company, the Administrator with any additional information which it may reasonably request in connection with tax and/or FATCA or CRS regulations/reporting requirements or other similar requirements in order to substantiate any representations made by me/us or otherwise and I/we authorise the Company or its agents to disclose such information relating to this application to such persons as they consider appropriate.
- I/We shall supply the Company with executed copies of those documents attached, or referred to, in Appendices 1 and 2 (for US and Non-US Taxpayers).
- I/We agree to provide to the Company and/or the Administrator at such times as each of them may request such declarations, certificates or documents as each of them may reasonably require (the "**Tax Information**") in connection with this investment (including for the purposes of tax and/or FATCA, or CRS regulations/reporting requirements). Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Company, and/or the Administrator immediately of any such change and further agree to request the redemption of Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Company.
- In addition to the Tax Information, I/We agree to promptly provide, and periodically update at any times requested by the Administrator, any information (or verification thereof) the Administrator deems necessary to comply with any requirement imposed on the Company including pursuant to tax and/or FATCA or CRS reporting requirements (including any imposed by any inter-governmental agreement ("IGA") or any legislation in relation to any intergovernmental agreement). This may include such information as is required to evidence any accountholder in the Company's status for such purposes, but to include (not limited to) whether any accountholder is a "foreign financial institution" for FATCA purposes or a "financial institution" for CRS purposes, whether any of its accountholders are US persons for FATCA purposes or the jurisdiction of residence of its accountholders for CRS purposes. I/We agree to waive any provision of foreign law that would, absent such a waiver, prevent compliance with such requests and acknowledges that, if it fails to provide such waiver, it may be required by the Investment Manager to withdraw from the Company if necessary to comply with FATCA, IGA and CRS (as applicable).
- We represent and warrant the completeness and accuracy of any information (as at the date of submission) and authorise the Company and/or the Administrator to act upon such information in good faith, including, but not limited to, disclosing or submitting such information to the Irish tax authorities. We represent and warrant that we have any requisite consent to disclose any information to you. The Company shall have no obligation to carry out any investigation with respect to the truth, accuracy or completeness of any information provided by us and I/We will, on demand, hold the Company harmless from any liability resulting from my/our failure to provide complete and accurate Information.
- I/We hereby acknowledge that if I/we fail to provide any information on a timely basis, I/We may be subject to 30% U.S. withholding tax on the investor's share of "withholdable payments" (as defined for purposes of FATCA) received by the Company.
- I/We hereby acknowledge that if I/we fail to provide any information and such failure results in the Company being unable to comply with the IGA or CRS (as applicable), the Investment Manager may exercise its right to completely redeem an applicant (at any time upon any or no notice). I/We further acknowledge and agree to indemnify the Company and its other investors for any losses resulting from the failure to meet mine/our obligations under this Section, including any U.S. withholding tax imposed on the Company.

**Note:** All investors must complete the relevant Self Certification FACTA and CRS Appendixes 1 or 2 in the Account Opening application form.

## U.S. Federal Income Tax Status

The following is a summary of certain U.S. federal income tax consequences to non-U.S. Shareholders who purchase Shares in the offering. The discussion is based upon the United States Internal Revenue Code of 1986, as amended (the "**United States Internal Revenue Code**"), Treasury Regulations, judicial authorities, published positions of the Internal Revenue Service (the "**IRS**") and other applicable authorities, all as in effect on the date hereof and all of which are subject to differing interpretations or change (possibly with retroactive effect). The discussion does not address all of the tax consequences that may be relevant to a particular Shareholder or to Shareholders subject to special treatment under federal income tax laws. This discussion is limited to Shareholders who hold their Shares as capital assets. No ruling has been or will be sought from the IRS regarding any matter discussed herein. Counsel to the ICAV has not rendered any legal opinion regarding any tax consequences relating to the ICAV

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or an investment in the ICAV. No assurance can be given that the IRS would not assert, or that a court would not sustain, a position different from any of the tax aspects set forth below. **Prospective investors must consult their tax advisers as to the federal income tax consequences of acquiring, holding and disposing of Shares, as well as the effects of state, local and non-U.S. tax laws.**

PROSPECTIVE INVESTORS SHOULD ONLY CONSIDER AN INVESTMENT IN THE ICAV BASED ON ANTICIPATED PRE-TAX ECONOMIC RETURNS. TAX ADVANTAGES (I.E., DEDUCTIONS AND LOSSES) ARE NOT A SIGNIFICANT OR INTENDED FEATURE OF AN INVESTMENT IN THE ICAV.

For purposes of this summary, a "U.S. person" is a citizen or individual resident of the U.S., a corporation (or an entity treated as a corporation for U.S. federal income tax purposes) created or organized in the U.S. or under the laws of the U.S. or any political subdivision thereof, an estate the income of which is subject to U.S. federal income taxation regardless of its source, or a trust if (i) a court within the U.S. is able to exercise primary supervision over the administration of the trust and one or more U.S. fiduciaries have the authority to control all substantial decisions of the trust or (ii) the trust was in existence on August 20, 1996 and properly elected to be treated as a U.S. person. Consequently, this summary addresses tax consideration for people and entities that are not U.S. persons. The U.S. federal income tax treatment of a partner or other beneficial owner in an entity treated as a partnership or other flow-through entity generally will depend on the status of the partner and the activities of such partnership. Partners and partnerships (including beneficial owners of pass-through entities and such entities themselves) should consult their tax advisers as to the particular U.S. federal income tax consequences applicable to them.

## **The ICAV**

The ICAV will be treated as a corporation for U.S. federal income tax purposes. Thus, subject to the rules discussed below, the income, gains, losses, deductions and expenses of the ICAV will not be passed through to Shareholders, and all distributions by the ICAV to Shareholders will be treated as dividends, return of capital and/or capital gains.

Given the nature of the ICAV's investment activities, the ICAV expects that it will not be engaged in a U.S. trade or business as determined for U.S. federal income tax purposes. Nevertheless, no assurances can be given in this regard. If, contrary to expectations, the ICAV were treated as being engaged in a U.S. trade or business, then any of its income that is effectively connected with such U.S. trade or business generally would be subject to regular U.S. federal income taxation (and may also be subject to a 30% U.S. branch profits tax), thereby materially adversely affecting the ICAV's net asset value and ability to make distributions to Shareholders.

Certain dividends, interest and other income received by the ICAV from sources outside of the U.S. may be subject to withholding taxes imposed by other countries. Certain types of periodic income received by the ICAV from sources inside the U.S. may be subject to U.S. withholding tax at a rate of 30%.

## **Non-U.S. Investors**

**An investor who is not a U.S. person** (as defined above for U.S. federal income tax purposes), generally will not be subject to U.S. federal income taxation on a Fund distribution or on gains recognized on the sale, exchange or redemption of Shares where such Non-U.S. Investor's nexus with the U.S. is solely as a result of an investment in Shares.



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**DECLARATION OF RESIDENCE OUTSIDE IRELAND  
(Non-Resident Composite Declaration)**

Applicants resident outside Ireland are required by the Irish Revenue Commissioners to make the following declaration which is in a format authorised by them, in order to receive payments 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 the declaration are defined in the Prospectus.

**Declaration on own behalf/on behalf of a Company**

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

**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

**IMPORTANT NOTES REGARDING THIS DECLARATION**

1. Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
2. To be valid, the Account Opening Form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.
3. If the Account Opening Form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, a copy of the power of attorney must be attached.
4. If you cannot make this declaration please contact the Administrator. Those Irish residents who are entitled to payment without deduction of tax, for example pension funds should request the appropriate alternative form of declaration from the Administrator.

Name and address of applicant: \_\_\_\_\_

Signature of applicant or authorised signatory: \_\_\_\_\_ (declarant)

Capacity of authorised signatory (if applicable): \_\_\_\_\_

Date: \_\_\_/\_\_\_/\_\_\_

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Joint Applicants:

Names: \_\_\_\_\_  
\_\_\_\_\_

Signatures: \_\_\_\_\_  
\_\_\_\_\_

***Please note:***

1. This Application Form must be signed by each applicant and sent to Apsley Fund ICAV, c/o Northern Trust International Fund Administration Services (Ireland) Limited, Transfer Agency Dept., George's Court, 54-62 Townsend Street, Dublin 2, Ireland.
2. A firm (such as a partnership and not a limited company) should make applications in the name(s) of and signed by the proprietor(s).
3. A corporation should complete this form under seal or under the hand of a duly authorised official who should state his capacity and furnish a certified copy of the authority pursuant to which such official is authorised.
4. If people other than the authorised signatories are authorised to instruct dealing activity on the account then a list of the relevant personnel together with their signatures should be attached to the form and forwarded to the Administrator.

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## Appendix 1

### **Individual (Controlling Person's) 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 Irish Revenue 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 or multiple account holders each investor is required to complete a separate Self-Certification form.

**Sections 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 \*)*

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#### **Section 1: Investor 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: \_\_\_\_\_

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Postal/ZIP Code: \_\_\_\_\_ Country: \_\_\_\_\_

**Place of Birth\***

**Town or City of Birth\*:** \_\_\_\_\_ **Country of Birth\*:** \_\_\_\_\_

Date of Birth\*: \_\_\_\_\_

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 54-62 Townsend Street  
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**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 chose more than one country)\***

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

Country of Tax Residency	Tax ID Number

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

**Section 4 – Type of Controlling Person**

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

For joint or multiple Controlling Persons please complete a separate Self-Certification form for each Controlling Person

<b>Please Confirm what type of Controlling Person applicable under CRS that applies to you/the investor by ticking the appropriate box.</b>	<b>Please Tick</b>	<b>Entity Name</b>
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		

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**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.

Authorised Signature\*: \_\_\_\_\_

Print Name\*: \_\_\_\_\_

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

Capacity\*: \_\_\_\_\_

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## Appendix 2

### **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 Irish Revenue website at <http://www.revenue.ie/en/business/aeoi/index.html> or the following link: <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.*

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

*(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".***

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#### **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: \_\_\_\_\_

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**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:

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 3, 4 and 5)

**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.	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> : _____	
II.	<i>Exempt Beneficial Owner</i>	
III.	<i>Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the Agreement)</i>	
IV.	<i>Non-Participating Foreign Financial Institution</i>	
V.	<i>Excepted Foreign Financial Institution</i>	

**3.4 Non-Financial Institutions under FATCA:**

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

I.	<i>Active Non-Financial Foreign Entity</i>	
II.	<i>Passive Non-Financial Foreign Entity</i> (If this box is ticked, please include self-certification forms for each of your Controlling Persons)	
III.	<i>Excepted Non-Financial Foreign Entity</i>	



Apsley Fund ICAV  
 c/o Northern Trust International Fund Administration Services (Ireland) Limited  
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**Section 4: CRS Declaration of Tax Residency (please note that you may choose more than one country)\***

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TIN")).

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

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

Country of Tax Residency	Tax ID Number

**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):

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

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

**5.1 Financial Institutions under CRS:**

If the Entity is a *Financial Institution*, please tick one of the below categories

I.	Financial Institution under CRS (other than (II) below)	
II.	An <i>Investment Entity</i> located in a <i>Non-Participating Jurisdiction</i> and managed by another <i>Financial Institution</i> (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity and complete a separate individual self-certification forms for each of your Controlling Persons **)	

**5.2 Non-Financial Institutions under CRS:**

If the Entity is a *Non-Financial Institution*, please tick one of the below categories

I.	Active <i>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	
II.	Active <i>Non-Financial Entity</i> – a Government Entity or Central Bank	
III.	Active <i>Non-Financial Entity</i> – an International Organisation	
IV.	Active <i>Non-Financial Entity</i> – other than (I)-(III) (for example a start-up NFE or a non-profit NFE)	
V.	Passive <i>Non-Financial Entity</i> (If this box is ticked, please complete a separate Individual Self-Certification Form for each of your Controlling Person(s) )	

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**\*\*Controlling Person's:**

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

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

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

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

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**Section 6: 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):\*** \_\_\_\_\_

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### Appendix 3

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

[On Company Letterhead of Regulated Entity]

[Date]

**Apsley Fund ICAV**  
**c/o Northern Trust International Fund Administration Services (Ireland) Limited**  
**George's Court**  
**54 -62 Townsend Street**  
**Dublin 2**

Northern Trust International Fund Administration  
Services (Ireland) Limited  
Georges Court  
54-62 Townsend Street  
Dublin 2  
Ireland

**Re: Investors in Apsley Fund ICAV**  
**Customer Due Diligence: Anti-Money Laundering/Counter Terrorist Financing**

Dear Sirs,

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

We confirm that we have appropriate measures in place under [state applicable AML/CTF legislation] to ensure compliance with AML and CTF regulations. We confirm that we are supervised or monitored for compliance with the requirements specified in the Third Money Laundering Directive (Directive 2005/60/EC of the European Parliament and of the council of 26 October 2005) and pursuant to which requirements we are required to undertake appropriate measures to ensure compliance with Anti-Money Laundering ('AML') and Counter Terrorist Financing ('CTF'). We acknowledge that we are being relied upon by [Insert name of Fund or Manager] and Northern Trust International Fund Administration Services (Ireland) Limited ('Northern Trust') as Transfer Agent appointed by [Insert name of Fund or Manager] for the purposes of meeting the aforementioned Customer Due Diligence ('CDD') obligations in relation to investors in [Insert Name of Fund] and have not relied on another third party in meeting our CDD obligations.

On an ongoing basis, we will continue to satisfy ourselves, and will confirm to you on request, that we have proper internal controls, policies and procedures in place to combat money laundering and have adopted measures to prevent and detect the commission of the offence of financing terrorism. We confirm that all such

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controls, policies and procedures are current and kept up to date and that we shall provide you with access to these internal controls, policies and procedures as required. We also confirm that pursuant to the AML/CTF regulations, we shall (i) keep records evidencing the procedures applied and information obtained in relation to each investor; and (ii) keep records evidencing the history of services and transactions carried out in relation to each investor and shall provide you with these records as required.

In ensuring compliance with AML and CTF regulations:

- We hereby confirm our identification of beneficial owners and verification of the beneficial owners' identities (to the extent warranted by risk of money laundering and the financing of terrorism) such that we can be reasonably satisfied that we know who the beneficial owners are as well as the ownership and control structures.
- We undertake to retain documents and information sourced for the purposes of identification and verification of investors in **[Insert Name of Fund]** and beneficial owners and understanding the purpose and intended nature of the investment by investors in **[Insert Name of Fund]**.
- We undertake to provide copies of such documentation and information to either **[Insert Name of Fund or Manager]** or Northern Trust upon request.
- We undertake to retain such documents and information for a period of at least five years after (i) the date on which the Company's relationship with the investor has ended or (ii) the date of the last transaction (if any) with the investor, whichever is the later.
- We undertake that prior to the destruction of such documents and information; we will ensure that the relevant documents and information are provided to you, where there is a continuing relationship between investors and **[Insert Name of Fund or Manager]**.
- To the extent an investor introduced by us is a non-US bank, pursuant to the USA Patriot Act, as amended; we will obtain proof from such investor that it is not a shell bank within the meaning of the USA Patriot Act, as amended.
- Where an investor is an individual does not present to us for verification in person ('non face to face') we shall address the additional risk presented by this scenario in accordance with the AML/CTF Regulations and our internal controls, policies and procedures in place to combat money laundering and to prevent and detect the commission of the offence of financing terrorism.

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

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

In particular we hereby undertake to notify the Company or Northern Trust immediately where:

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- We are unable to sufficiently identify or verify the investor or identify or verify the beneficial owner(s) of the investor (to the extent warranted by risk of money laundering and the financing of terrorism);
- We suspect that an investor or beneficial owner(s) of the investor is or was involved in money laundering or terrorist financing; or
- We become aware that the investor or beneficial owner(s) of the investor are individuals or institutions against whom sanctions have been imposed by the EU, the United Nations or the Office of Foreign Asset Control (OFAC).

Yours faithfully,

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

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**[Appendix 4]**

[On Company Letterhead of Regulated Entity]

[Date]

**Apsley Fund ICAV**  
**[Fund/Manager Address]**

Northern Trust International Fund Administration  
Services (Ireland) Limited  
Georges Court  
54-62 Townsend Street  
Dublin 2  
Ireland

**Re: Investors in Apsley Fund ICAV**  
**Customer Due Diligence: Anti-Money Laundering/Counter Terrorist Financing**

Dear Sirs,

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

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

On an ongoing basis, we will continue to satisfy ourselves, and will confirm to you on request, that we and **[Insert Name of Subsidiary/ Nominee Company]** have proper internal controls, policies and procedures in place to combat money laundering and have adopted measures to prevent and detect the commission of the offence of financing terrorism. We confirm that all such controls, policies and procedures are current and kept up to date and that we shall provide you with access to these internal controls, policies and procedures as required. We also confirm that pursuant to the AML/CTF regulations, we shall (i) keep records evidencing the procedures applied and information obtained in relation to each investor; and (ii) keep records evidencing the history of services and transactions carried out in relation to each investor and shall provide you with these records as required.

In ensuring compliance with AML and CTF regulations:

- We and **[Insert Name of Subsidiary/ Nominee Company]** hereby confirm our identification of beneficial owners and verification of the beneficial owners' identities (to the extent warranted by risk of money

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laundering and the financing of terrorism) such that we can be reasonably satisfied that we know who the beneficial owners are as well as the ownership and control structures.

- We and **[Insert Name of Subsidiary/ Nominee Company]** undertake to retain documents and information sourced for the purposes of identification and verification of beneficial owners and understanding the purpose and intended nature of investment on behalf of beneficial owners.
- We and **[Insert Name of Subsidiary/ Nominee Company]** undertake to provide copies of such documentation and information to either **[Insert Name of Fund or Manager]** or Northern Trust upon request.
- We and **[Insert Name of Subsidiary/ Nominee Company]** undertake to retain such documents and information for a period of at least five years after (i) the date on which the Company's relationship with the investor has ended or (ii) the date of the last transaction (if any) with the investor, whichever is the later.
- We and **[Insert Name of Subsidiary/ Nominee Company]** undertake that prior to the destruction of such documents and information, we will ensure that the relevant documents and information are provided to you, where there is a continuing relationship between **[Insert Name of Subsidiary Company]** and **[Insert Name of Fund or Manager]**.
- To the extent an investor introduced by **[Insert Name of Subsidiary/ Nominee Company]** is a non-US bank, pursuant to the USA Patriot Act, as amended, we will obtain proof from such investor that it is not a shell bank within the meaning of the USA Patriot Act, as amended.
- Where an investor is an individual does not present to us for verification in person ('non face to face') we shall address the additional risk presented by this scenario in accordance with the AML/CTF Regulations and our internal controls, policies and procedures in place to combat money laundering and to prevent and detect the commission of the offence of financing terrorism.

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

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

In particular we hereby undertake to notify the Company or Northern Trust immediately where:

- We are unable to sufficiently identify or verify the investor or identify or verify the beneficial owner(s) of the investor (to the extent warranted by risk of money laundering and the financing of terrorism);
- We suspect that an investor or beneficial owner(s) of the investor is or was involved in money laundering or terrorist financing; or



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- We become aware that the investor or beneficial owner(s) of the investor are individuals or institutions against whom sanctions have been imposed by the EU, the United Nations or the Office of Foreign Asset Control (OFAC).

Yours faithfully,

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