

Mailing Address C/o Maples Fund Services Dublin 32 Molesworth St Dublin 2 Ireland Facsimile: +353 1 697 3390 Tel: + 353 1 697 3219 Email: investorservicesdublin@maplesfs.com

Please tick here if this has already been sent by facsimile transmission. □

#### Instructions

For initial subscriptions for units you must complete the Application Form and post it to the address above. Completed Application Forms may also be sent by fax or by electronic means with the original Forms and the supporting documentation required for Anti-Money Laundering purposes to follow by post immediately thereafter.

Failure to provide the original Application Form along with the documentation required for Anti-Money Laundering purposes may result in the deduction of tax due to the Irish Finance Act requirements outlined in the Anti-Money Laundering section and/or a delay in the acceptance and/or payment of a transfer/redemption request.

Subsequent subscriptions may be made in writing or by facsimile or by electronic means or telephone, stating your registration details and the amount to be invested.

Non Retail Accounts – An authorised signatory list must be provided at the time of account opening for the investing entity in whose name the account is being opened. The Application Form must be signed by no less than two authorised signatories.

Any changes to the original account details must be received in original format and signed by no less than two authorised signatories, in the case of a company, on corporate letterhead, and in the case of retail applicants, all account signatories must authorise every instruction.

Subscription Information						
Please pay subscription monies to the following account(s)						
	Euro	US Dollar - FEDWIRE				
Correspondent Bank	HSBC BANK PLC, LONDON	CITIBANK N.A., NEW YORK				
Swift Code	MIDLGB22	CITIUS33				
Beneficiary Bank	BROWN BROTHERS HARRIMAN & CO.	BROWN BROTHERS HARRIMAN & CO.				
Beneficiary Bank ABA\SWIFT	BBHCUS33	021000089				
Account Number	37860431	09250276				
Beneficiary Name	SouthernSun Value Fund plc.	SouthernSun Value Fund plc.				
Beneficiary Account No	6388383	6388383				
Reference	Name of Fund – Applicant	Name of Fund – Applicant				

Please ensure that your bank quotes the details above in the electronic funds transfer to the appropriate bank.

Subscription monies should be received by wire transfer in cleared funds by the relevant Settlement Date as set out in the relevant Supplement in the currency of the relevant Units. The Administrator may, at its discretion, accept payment in other currencies, but such payments will be converted into the currency of the relevant Unit class at the then prevailing exchange rate and any conversion expenses shall be borne by the Unitholder. This may result in a delay in processing the application.



<b>Details of Investment:</b> The Applicant, having received to invest in the Company, as ir			is of SouthernSun Value Fund plc. (th	e "Company") hereby applies
Fund Name	Share Class	Currency	Number of Units	Value of Subscription
SouthernSun US Value Fund	Investor (A) Class	USD		
SouthernSun US Value Fund	Investor (A) Class Euro	EUR		
SouthernSun US Value Fund	Institutional (I) Class	USD		
SouthernSun US Value Fund	Institutional (I) Class Euro	EUR		
SouthernSun US Value Fund	Y Class	USD		

Should you have any questions, please contact the Transfer Agent, Maples Fund Services Dublin, 32 Molesworth St, Dublin 2, Ireland. Telephone: +35316973219, Facsimile: +35316973390 Email:<u>investorservicesdublin@maplesfs.com</u>

Account Registration Detai	ils			
Registered Name				
Account Designation (if any)				
Shareholder Type <sup>1</sup>				
Occupation (if individual or joint account) or Nature of purpose of entity (if entity)				
Source of wealth (e.g. inheritance, income from employment, income from business activities)				
Source of funds (e.g. Income from employment, inheritance, insurance payout)				
Registered Address PO or C/O will not be accepted				
Mailing Address (if different)				
Contact Name		 	 	
Contact Details	Telephone	Facsimile	Email	



 SouthernSun Value Fund plc.
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 Application Form
 Joint Applicant(s)

 Details of up to 3 additional holders may be added to the application. Please complete details in block capitals below.

Thist additional applicant d	etalls			
Registered Name				
Occupation (if individual				
or joint account) or				
Nature of purpose of				
entity (if entity)				
Source of wealth (e.g.				
inheritance, income from				
employment, income				
from business activities)				
Source of funds (e.g.				
Income from				
employment,				
inheritance, insurance				
payout)				
Registered Address				
PO or C/O will not be				
accepted				
Contact Name				
Contact Details	Telephone	Facsimile	Email	

Second additional applicar				
Second additional applicar	it details			
Registered Name				
Occupation (if individual				
or joint account) or				
Nature of purpose of				
entity (if entity)				
Source of wealth (e.g.				
inheritance, income from				
employment, income				
from business activities)				
Source of funds (e.g.				
Income from				
employment,				
inheritance, insurance				
payout)				
Registered Address				
PO or C/O will not be				
accepted				
Contact Name				
Contact Details	Telephone	Facsimile	Email	

Third additional applicant	details
Registered Name	
Occupation (if individual	
or joint account) or	
Nature of purpose of	
entity (if entity)	
Source of wealth (e.g.	
inheritance, income from	
employment, income	
from business activities)	



Application Form				
Source of funds (e.g. Income from employment, inheritance, insurance payout)				
Registered Address PO or C/O will not be accepted				
Contact Name				
Contact Details	Telephone	Facsimile	Email	

\*\* Correspondence will only be sent to the first named applicant/correspondence address. Additional applicants will be required to provide confirmation of residential address details for anti-money laundering verification purposes.



# BENEFICIARY OWNERS – TO BE COMPLETED WHERE THE INVESTOR(S) IS/ARE NOT A NATURAL PERSON

We have noted below any beneficiary owner\* of the registered investor

Beneficiary Owner 1 (wher	re applicable)
Registered Name	
Address	
Entity Type <sup>1</sup>	
Date of Birth (if individual)	

Beneficiary Owner 2 (when	re applicable)
Registered Name	
Address	
Entity Type <sup>1</sup>	
Date of Birth	

Beneficiary Owner 3 (where applicable)						
Registered Name						
Address						
Entity Type <sup>1</sup>						



Date of Birth (if individual)



Beneficiary Owner 4 (when	re applicable)
Registered Name	
Address	
Entity Type <sup>1</sup>	
Date of Birth (if individual)	

A beneficial owner is considered by the Fund to be an individual or corporate entity

- (a) which ultimately owns or controls whether through direct or indirect ownership or control (including through bearer shareholdings) more than 25 per cent of the shares or voting rights in the investor, or
- (b) otherwise exercises controls over the management of the investor.

Intermediary Details (if applicable)								
Broker ID			Branch ID					
Broker Name								
Broker Address								
Representative Name			Representative	ID				
Contact Details	Telephone		Facsimile		Email			

My Treasury / Sungard (Please tick if applicable)

\*I/ \*We provide authorisation for account information to be shared with the \*My Treasury / \*Sungard platform where required. \*Please delete as appropriate.



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

Country in which Shareholder is ordinarily tax resident:

Tax ID number of Shareholder:

Town and Country of Birth: \_\_\_\_\_\_

Confirm whether listed or not listed:

If listed, confirm whether subject to the requirements of the Transparency Directive<sup>1</sup> or equivalent standards regarding transparency of ownership (specifying applicable regime)<sup>2</sup>:

Confirm whether beneficial owner is:

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

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

Third party beneficial owner(s) name(s):

Type of investor (individual, corporate, pension fund, etc.):

Name of regulator where intermediary is regulated:

If listed, confirm whether subject to the requirements of the transparency directive<sup>3</sup> or equivalent standards regarding transparency of ownership (specifying applicable regime) 4:

#### Part 2: Beneficial Owners and the Beneficial Ownership Regulations

Please tick here where the account holder or, if the account holder is an intermediary, the third party beneficial owner is listed on a regulated market and subject to disclosure requirements consistent with Union law<sup>5</sup> or subject to equivalent standards which ensure adequate transparency of ownership information:  $\Box$ 

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

<sup>2</sup> Note the Company in its sole discretion retains power to decide on equivalence of any other regime.
<sup>3</sup> Directive 2004/109/EC of the European Parliament and of the Council of 15 December 2004 on the harmonisation of transparency requirements in relation to information about issuers whose securities are

admitted to trading on a regulated market and amending Directive 2001/34/EC.

<sup>4</sup> Note the Company in its sole discretion retains power to decide on equivalence of any other regime.

<sup>5</sup> Including the Transparency Directive (as defined in footnote (1))

<sup>&</sup>lt;sup>1</sup> Directive 2004/109/EC of the European Parliament and of the Council of 15 December 2004 on the harmonisation of transparency requirements in relation to information about issuers whose securities are admitted to trading on a regulated market and amending Directive 2001/34/EC.

<sup>&</sup>lt;sup>1</sup>: e.g. (i) individual (ii) joint account, (iii) publicly-listed company, (iv) state-owned entity, (v) pension fund, (vi) regulated credit and financial institution, (vii) nominee company / intermediary company, (viii) private and unlisted companies, (ix) partnerships, (x) collective investment schemes, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)



(A)	If either (i) the beneficial owner is a natural person, and owner is a natural person please provide all information	is the same as the account holder or (ii) the third party beneficial below.
	<ul> <li>party beneficial owner named in Part 1 of this section information for:</li> <li>each shareholder (or equivalent) that is a natural pentity; and</li> </ul>	egistration Details" section of this Agreement above or (ii) the third on above is <u>not</u> a natural person, please provide the following person with at least 25% ownership or control of the subscribing ping entity is/are an entity, any natural person(s) indirectly having hareholder entity.
Name (fi	rst name, surname):	Residential address:
Date of b	irth:	Nationality:
Statemer owner <sup>6</sup> :	nt of (I) the nature and (II) the extent of the interest in	the Company held by the relevant natural person as beneficial
For Inter	mediaries Only	
Is this inf	ormation being provided with the knowledge of the relev	rant natural person? (yes or no):
and (B) p		section or any part(s) thereof, please (A) set out the reasons(s) ledge of a relevant natural person, with confirmation as to 7

<sup>&</sup>lt;sup>6</sup> For example, whether shares will be held by a natural person directly <u>or</u> indirectly via the account owner (or both), or control is exercised via other means (e.g. a right to issue binding directions affecting financial/operational policies under a shareholder agreement with the investor), and (ii) number of shares subscribed for if account holder is a natural person (with a breakdown of direct and indirect ownership as appropriate) or percentage of shares/voting rights held by a natural person in the investor. Please attach a continuation sheet if the space herein is insufficient

<sup>&</sup>lt;sup>7</sup> Please attach a continuation sheet if the space herein is insufficient.

<sup>&</sup>lt;sup>1</sup>: e.g. (i) individual (ii) joint account, (iii) publicly-listed company, (iv) state-owned entity, (v) pension fund, (vi) regulated credit and financial institution, (vii) nominee company / intermediary company, (viii) private and unlisted companies, (ix) partnerships, (x) collective investment schemes, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)



#### Bank Account Details for Redemption Payments

Please list the details of the account to which redemption proceeds, and/or dividend distributions should be paid. Payments will only be made to a bank account held in the name of the registered shareholder. No Third Party Payments will be made. Redemptions will not be processed on non cleared/verified accounts.

Both IBANS & SWIFT (BIC) Codes should be quoted for all banks within the EU/EEA.

Amendments to investors' payment instructions will only be effected upon receipt of an original instruction which has been duly authorised. In the case of joint accounts, instructions will only be made upon receipt of instruction duly signed by all applicants.

The Administrator does not accept any responsibility for the bank account details quoted and any payments made using these details will be at your risk.

Correspondent Bank Name				
Correspondent Bank Address				
Correspondent Bank Sort Code/ SWIFT (BIC)/ ABA/Fedwire				
Beneficiary Bank Name				
Beneficiary Bank Address				
Beneficiary Bank Sort Code/ SWIFT (BIC)/ ABA/Fedwire				
Beneficiary Account Name				
Beneficiary Account Number				
Payment Type (please select)	мт202 🛛	/	MT103	
Currency				
Reference				

#### Dividend

The Fund is an accumulating Fund and, therefore, it is not currently intended to distribute dividends to the Shareholders. The income and earnings and gains of each Class in the Fund will be accumulated and reinvested on behalf of Shareholders.

#### **Data Protection**

1. Company

I/We hereby acknowledge that by virtue of making an investment in the Company, and the associated interactions with the Company and its affiliates and delegates (including completing this application form), I/we will be providing the Company with



personal information which will be collected, stored and used by the Company and its duly authorised delegates. I/We acknowledge that we are advised to read in detail the Privacy Notice attached. This document provides an outline of my/our data protection rights and the Company's data protection obligations as they relate to my/our investment in the Company.

#### **Politically Exposed Persons**

Please complete EITHER Section A or B below, with reference to the definitions below

A Politically-Exposed Person" ("PEP") is an individual who has at any time in the preceding 12 months been, entrusted with a prominent public function. This includes the following individuals (but excluding any middle ranking or more junior official):

- a. a "specified official";
- b. a member of the administrative, management or supervisory body of a state-owned enterprise;

A "specified official" is (including any such officials in an institution of the European Communities or an international body):

- a. a head of state, head of government, government minister or deputy or assistant government minister;
- b. a member of a parliament;
- c. a member of a supreme court, constitutional court or other high level judicial body whose decisions, other than in exceptional circumstances, are not subject to further appeal;
- d. a member of a court of auditors or of the board of a central bank;
- e. an ambassador, chargé d'affairs or high-ranking officer in the armed forces

1. An immediate family member of a PEP includes any of the following persons:

- a. any spouse of the PEP;
- b. any person who is considered to be equivalent to a spouse of the PEP under the national or other law of the place where the person or PEP resides;
- c. any child of the PEP;
- d. any spouse of a child of the PEP;
- e. any person considered to be equivalent to a spouse of a child of the PEP under the national or other law of the place where the person or child resides;
- f. any parent of the PEP;
- g. any other family member of the PEP who is of a class prescribed by the Minister for Justice under section 37(11) of the Act.

A close associate of a PEP includes any of the following persons

- a. any individual who has joint beneficial ownership of a legal entity or legal arrangement, or any other close business relations, with the PEP;
- b. any individual who has sole beneficial ownership of a legal entity or legal arrangement set up for the actual benefit of the PEP.

As an example, a "beneficial owner" of a body corporate is any individual who (other than a company having securities listed on a regulated market):

- a. ultimately owns or controls, whether through direct or indirect ownership or control (including through bearer shareholdings), more than 25 per cent of the shares or voting rights of the body; or
- b. otherwise exercises control over the management of the body.

SECTION A: TO BE COMPLETED ONLY IF THE PEP RULES APPLY WITH REFERENCE TO THE ABOVE DEFINITIONS the application is being made by a PEP / immediate family member of a PEP / close associate of a PEP OR

the applicant has a beneficial owner who is a PEP / immediate family member of a PEP / close associate of a PEP OR

the application is being made for the benefit of a PEP / immediate family member of a PEP / close associate of a PEP OR

it is intended to transfer the shares to a PEP / immediate family member of a PEP / close associate of a PEP

Name of PEP Address	s of PEP
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SouthernSun Value Fund plc.

Application Form						
Office of PEP		Relationship of Applicant or Applicant's Beneficial Owner to PEP				
Source of Wealth of the PE	Source of Wealth of the PEP (e.g. Income from employment, Income from company business, inheritance, etc)					
Source of funds of PEP (e.g	income from employment inheritance	e insurance navout)				
	Source of funds of PEP (e.g. income from employment, inheritance, insurance payout) SECTION B: PLEASE TICK BOX BELOW IF THE PEP RULES DO NOT APPLY WITH REFERENCE TO THE DEFINITIONS ABOVE:					
I/we confirm that the appl AND	ication is NOT being made by a PEP / in	nmediate family member of	a PEP / close associate of a PEP			
AND	e a beneficial owner who is a PEP / imm					
AND	ng made for the benefit of a PEP / imme	ediate family member of a P	EP / close associate of a PEP			
it is NOT intended to trans	sfer the shares to a PEP / immediate far	mily member of a PEP / clos	e associate of a PEP			
US Person Confirmation						
Please complete EITHER SE	CTION A OR SECTION B as applicable					
SECTION A: PLEASE TICK BC	DX AND DELETE AS APPLICABLE IF THE S	STATEMENT BELOW IS CORF	RECT			
	are a US Person (as defined in the Pros son, OR I/we intend to transfer any Sha					
PLEASE SUPPLY A COPY OF IS A NON-US PERSON.	PLEASE SUPPLY A COPY OF THE US INTERNAL REVENUE SERVICE FORM W-9 OR AN ORIGINAL W-8 BEN IF THE BENEFICIAL OWNER IS A NON-US PERSON.					
SECTION B: PLEASE TICK BOX AND DELETE AS APPLICABLE IF THE STATEMENT BELOW IS CORRECT						
	are not a US Person (as defined in the t of, a US Person, nor do I/we intend to					
Personal Portfolio Investm	ent lindertaking (PPIII)					
	we are an Irish Resident or Irish Ordinar	y Resident who is a director	or has a relationship with a director			
of the fund.						
Please enter name(s) of PP	Please enter name(s) of PPIU					
*Delete as appropriate						
UCITS V						
By signing this Application	Form, I/we acknowledge that *I/we ha D) applicable to the relevant Share clas					
		, ,	0			



prior to making an application for Shares of such Class(es). \*Delete as appropriate

#### **Declarations and Signatures**

I/We, having received and considered a copy of the Prospectus, hereby confirm that this application is based solely on the current Prospectus and the material contracts therein referred to together (where applicable) with the most recent annual report or semiannual report and accounts of the Trust/Company.

I/We undertake to observe and be bound by the provisions of the Articles of Association of the Company (as amended from time to time) and apply for the Shares issued in relation to this application to be entered in the register of Shareholders in my/our name(s) (or in the name of a nominee or agent).

I/We acknowledge that, owing to anti-money laundering requirements operating within their respective jurisdictions, the Company, its Directors, the Transfer Agent, the Manager and any distributor which may be appointed (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Company, its Directors, the Transfer Agent, the Manager and any distributor which may be appointed 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 requested by the parties referred to and has not been provided by me/us.

I / We agree that in order to allow the Company comply with the rules of Sections 1471 through 1474 (inclusive) of the Internal Revenue Code of 1986 of the US, as amended, any current or future regulations or official interpretations thereof, any agreement entered into thereunder, or any fiscal or regulatory legislation, rules or practices adopted pursuant to any intergovernmental agreement entered into in connection with the implementation thereof ("FATCA") or the OECD Common Reporting Standard ("CRS"), I / We will:

(i) provide the Company (or any nominated service provider) with any information necessary for FATCA or CRS reporting including but not limited to the self-certification forms included as appendices to this form; and

(ii) permit the Company to:

a. share such information with the US Internal Revenue Service, Irish Revenue or other relevant tax or other government authority as required by FATCA or CRS;

b. compel or effect the sale of the Shares if it fails to comply with the foregoing requirement; and

c. make any other amendments to any other documents entered into in connection with the subscription as may be necessary to enable the Company to comply with FATCA or CRS.

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

I/We hereby authorise the Transfer Agent to accept and execute any instructions, (including but not limited to any instructions regarding subscriptions, switches, transfers or redemptions of Shares or any payment in relation to same or otherwise) in respect of Shares to which this application relates, given by me/us in written form, by facsimile, by telephone or by electronic means. I/We hereby agree to indemnify each of the Transfer Agent 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 either of them acting upon instructions given in written form by me/us, i.e. facsimile, telephone instructions confirmed by me/us in writing. The Transfer Agent 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.

I/We consent to any notice or other document to be sent by the Company or the Transfer Agent to me/us as a Shareholder, by electronic means including but not limited to e-mail, swift or posting such notice or other document on a website notified to me/us by post or by e-mail.

I/We confirm that I/we have the capacity and am/are duly authorised to complete this form and to make the representations and



give the indemnities referred to herein.

I/We agree to provide these representations to the Company and its Directors at such times as either of them may request and to provide on request such certifications, documents or other evidence as the Company and/or its Directors may reasonably require to substantiate such representations.

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

I/ We understand that the representations and warranties made herein are continuous and all subsequent subscriptions of Shares in the Fund by me/us shall be governed by them, and I/we agree to notify the Company or the Transfer Agent immediately, if any representation or warranty are no longer accurate and to abide by any directions from the Company or the Transfer Agent arising as a result.

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

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

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

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

I/We confirm that being a person they I am/ We are over 18 years of age.

I/We hereby certify that I am/we are aware of the risks involved in the proposed investment as set out in the Prospectus.

I/We confirm that I am/we are in agreement with the distribution policy as outlined in the Prospectus.

I/We declare that the information contained in the declarations completed above is true and correct.

#### Investing as an Intermediary or on own behalf

Please indicate below whether the investment is being made on own behalf or as an intermediary.



I/we\* confirm that I/we\* are applying for the shares on my/our\* own behalf.

I/we\* confirm that I/we\* are applying for the shares as an intermediary on behalf of underlying shareholders / beneficiaries.

\*Delete as appropriate

#### Declaration of Residence Outside the Republic of Ireland

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

Terms used in this declaration are defined in the Prospectus. Please select either A or B

A - Declaration on Own Behalf

i. I/ We<sup>\*</sup> declare that I am/we<sup>\*</sup> are applying for the Units on my own/our own behalf/on behalf of a company<sup>\*</sup> and that I am/we are/the company<sup>\*</sup> is entitled to the Units in respect of which this declaration is made and that I am/we are/the company<sup>\*</sup> is not currently an Irish Resident or Irish Ordinary Resident, and should I/we/the company<sup>\*</sup> become an Irish Resident, I/we will so inform you, in writing, accordingly.

\*Delete as appropriate

B - Declaration as Intermediary

- i. I/ We<sup>\*</sup> declare that I am/we are<sup>\*</sup> applying for Units on behalf of persons who will be beneficially entitled to the Units, and who to the best of my/our<sup>\*</sup> knowledge and belief, are neither an Irish Resident or Irish Ordinary Resident, and
- ii. I/ we<sup>\*</sup> also declare that unless I/we<sup>\*</sup> specifically notify you to the contrary at the time of application, all applications for Units made by me/us<sup>\*</sup> from the date of this application will be made on behalf of such persons; and I/we<sup>\*</sup> will inform you in writing if I/we<sup>\*</sup> become aware that any person, on whose behalf I/we<sup>\*</sup> hold Units, becomes an Irish Resident.

\*Delete as appropriate



#### AUTHORISATION

I/We agree to be bound by	the Declarations	Representations	Consents and Indemnities se	t out in this	Application Form
If we agree to be bound by	ine Deciarations,	Representations,	consents and muchinities se	t out in this	Application i orm

Signature (1)	
Capacity of Authorised Signatory	
Name Authorised Signatory (1)	
Signature (2)	 
Capacity of Authorised Signatory	
Name Authorised Signatory (2)	
Signature (3)	
Capacity of Authorised Signatory	 
Name Authorised Signatory (3)	
Signature (4)	
Capacity of Authorised Signatory	 
Name Authorised Signatory (4)	
Date	

#### Important Information

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

To be valid, this application form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant and in the case of joint applicants, each must sign. In the case of a corporation, the application must be signed by authorised signatories as agreed in the corporate signing mandate.

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

Applicants who are resident or ordinarily resident in the Republic of Ireland or are an Exempt Irish resident as defined in the Prospectus, please contact the Transfer agent immediately.



# FATCA AND CRS SELF-CERTIFICATIONS

# Instructions for completion

We are obliged pursuant to the Intergovernmental Agreement Between the Government of Ireland and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA, Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Fund with relevant tax authorities .This form is intended to request information only where such request is not prohibited by Irish law. If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

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

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

# Entity Self-Certification for FATCA and CRS

# Instructions for completion and Data Protection notice.

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

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

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

If any of the information below about the account holder's tax residence or FATCA/CRS classification changes in

the future, please ensure that we are advised of these changes promptly.

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

(Mandatory fields are marked with an \*)

SouthernSun Value Fund plc. Application Form	ASSE	T MANAGEMENT
*Section 1: Account Holder Identification		
	(the " <b>Entity</b> ")	
*Country of Incorporation or Organisation:		
*Current (Resident or Registered) Address:		
Number: Street:		
City, town, State, Province or County:		
Postal/ZIP Code:	_ Country:	
Mailing address (if different from above):		
Number:Street:		
City, town, State, Province or County:		
Postal/ZIP Code:	_Country:	
Please tick either (a), (b) or (c) below and co a) The Entity is a <i>Specified U.S. Person</i> and the is as follows:	mplete as appropriate. ne Entity's U.S. Federal Taxpayer Identifying number (U.S.	TIN)
U.S. TIN:		
Or		
b) The Entity is not a Specified U.S. Person (I	Please also complete Sections 3, 4 and 5)	
Or		
<ul> <li>c) The Entity is a US person but not a Specifi</li> <li>Sections 4 and 5)</li> </ul>	ed U.S. Person (Please also complete	
Indicate exemption:		
*Section 3: Entity's FATCA Classification (th FATCA classification may differ from your CR	e information provided in this section is for FATCA, please S classification in Section 5):	e note your
3.1 Financial Institutions under FATCA:		
If the Entity is a <i>Financial Institution</i> , please f GIIN at 3.2 or indicate at 3.3 the reason why	cick one of the below categories and provide the Entity's you are unable to provide a GIIN.	
financial institution, (vii) nominee company / inte	listed company, (iv) state-owned entity, (v) pension fund, (vi) reperted and unlisted companies, (ix) parmediary company, (viii) private and unlisted companies, (ix) parmilar entities, (xii) charities, (xiii) clubs & societies, (xiv) places	rtnerships, (x) collective

(please specify)



Ι.	Irish Financial Institution or a Partner Jurisdiction Financial Institution	
II.	Registered Deemed Compliant Foreign Financial Institution	
III.	Participating Foreign Financial Institution	

# 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:

Ι.	The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN		
	Please provide the sponsor's name and sponsor's GIIN :		
	Sponsor's I	Name:	
	Sponsor's (	GIIN:	
	<b>∞NOTE</b> : th	nis 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.		
	The Entity	is an Exempt Beneficial Owner,	
П.	Please tick	and confirm the category of Exempt Beneficial Owner;	
	Ι.	Government Entity	
	н.	International Organisation	
	ш.	Foreign Central Bank	
	IV.	Exempt Retirement Fund	
	<i>V.</i>	Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.	



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

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

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



\*Section 4: Common Reporting Standard ("CRS") Declaration of Tax Residency (Note that Entities may have more than one country of Tax Residence)

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TIN")). Please refer to the OECD CRS Web Portal for AEOI for more information on Tax Residence and TIN's. <u>http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d</u>.en.347759

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

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

a) You are tax resident in a Jurisdiction that does not issue a TIN

Or

 $\square$ 

 $\square$ 

 $\square$ 

**b)** You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

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

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

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

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

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



# \*Section 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 above).

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

# 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.

https://www.revenue.ie/en/companies-and-charities/documents/aeoi/participating-jurisdictions.pdf

	A Reporting Financial Institution resident in a participating CRS jurisdiction	
I	A Financial Institution Resident in a Non-Participating Jurisdiction	_
	(Please also tick the box that applies)	
	<ul> <li>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)</li> <li>An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution</li> </ul>	
	<b>Other Financial Institution</b> , including a Depository Financial Institution, Custodial Institution or Specified Insurance Company	



III.	Non-Reporting Financial Institution under CRS.	
	Specify the type of Non-Reporting Financial Institution below:	
	Governmental Entity International	
	Organization Central Bank	
	Broad Participation Retirement Fund	
	Narrow Participation Retirement Fund	
	Pension Fund of a Governmental Entity, International Organization, or Central Bank	
	Exempt Collective Investment Vehicle	
	Trust whose trustee reports all required information with respect to all CRS Reportable	
	Accounts	
	Qualified Credit Card Issuer	
	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 Institution ("NFE") under CRS:

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

Ι.	Active NFE – a corporation the stock of which is regularly traded on an established securities market.	
	Please provide the name of the established securities market on which the corporation is regularly traded:	
II.	Active NFE – 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 on which the Entity is regularly traded:	
111.	Active NFE –a Government Entity or Central Bank	
IV.	Active NFE – an International Organisation	
V.	Active NFE –other than those listed in I, II, III or IV above.	
	(for example a start-up NFE or a non-profit NFE)	
VI.	Passive NFE-If this box is ticked please also complete Section 6.1 for each of the	
	Controlling Person(s) of the Entity and a separate "Individual (including Controlling Person's Self-	
	<i>Certification for FATCA and CRS form</i> " as indicated in section 6.2 for each Controlling Person(s)	
		1



#### Section 6: Controlling Persons

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

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

For further information on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard. <u>http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/</u>

# 6.1 Controlling Person(s) of the Account Holder:

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

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

١.	
II.	
III.	

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

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



#### \*Section 7: Declarations and Undertakings

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

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

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

\*Authorised Signature(s):

\*Print Name(s):

\*Capacity in which declaration is made:

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



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

### Instructions for completion and Data Protection Notice

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

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

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

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

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

# <u>Section 1, 2, 3 and 5</u> must be completed by all Account holders or Controlling Persons.

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

(Mandatory fields are marked with an \*)

*Section 1: Ac	count Holder/Controlling	Person Identification		
*Account Hold	der / Controlling Person N	ame:		
*Current Resid	dential Address:			
Number:	Street:			City, Town, State
Province or Co	ounty:		Postal/ZIP Code:	
Country:				
Mailing addre	ss (if different from above	e):		
Number:	Street:			City, Towr
State, Province	e or County:	Postal/ZIP Code:		_

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tion Form		SouthernSun Asset MANAGEMENT
Country:		
*Place and Date Of Birth		
*Town or City of Birth:	*Country of Birth:	
*Date of Birth:		
*Section 2: FATCA Declaration of	f U.S. Citizenship or U.S. Residence for T	ax purposes:
Please tick either (a) <b>or</b> (b) and co	omplete as appropriate.	
(a) I confirm that <b>I am</b> a identifying number (U.S. TIN) is a		for tax purposes and my U.S. federal taxpa
OR		
(b) 🛛 I confirm that I am I	<b>not</b> a U.S. citizen or resident in the U.S. fo	or tax purposes.
(please confirm all Tax Residenci	ies)	ency/Residencies
(please confirm all Tax Residence Please indicate your country of ta tax residence and associated tax For further guidance on Tax Resid http://www.oecd.org/tax/autom	<b>ies)</b> ax residence (if resident in more than one	e country please detail all countries of CRS Information Portal
(please confirm all Tax Residence Please indicate your country of ta tax residence and associated tax For further guidance on Tax Reside	<b>ies)</b> ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD	e country please detail all countries of CRS Information Portal
(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax i For further guidance on Tax Resid <u>http://www.oecd.org/tax/autom</u> <u>numbers/#d.en.347759</u>	<b>ies)</b> ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD	e country please detail all countries of CRS Information Portal assistance/tax-identification-
(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax i For further guidance on Tax Resid <u>http://www.oecd.org/tax/autom</u> <u>numbers/#d.en.347759</u> NOTE: Under the Irish legislation provided unless:	<b>ies)</b> ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD <u>natic-exchange/crs-implementation-and-</u>	e country please detail all countries of CRS Information Portal assistance/tax-identification-
<ul> <li>(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax is</li> <li>For further guidance on Tax Resident http://www.oecd.org/tax/automonumbers/#d.en.347759</li> <li>NOTE: Under the Irish legislation provided unless:</li> <li>a) You are tax resident in a Juris</li> </ul>	ies) ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD <u>natic-exchange/crs-implementation-and-</u> implementing the CRS, provision of a Tax	e country please detail all countries of CRS Information Portal <u>assistance/tax-identification-</u> CID number (TIN) is required to be
<ul> <li>(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax is</li> <li>For further guidance on Tax Resident http://www.oecd.org/tax/automonumbers/#d.en.347759</li> <li>NOTE: Under the Irish legislation provided unless:</li> <li>a) You are tax resident in a Juris</li> </ul>	ies) ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD <u>natic-exchange/crs-implementation-and-</u> implementing the CRS, provision of a Tax sdiction that does not issue a TIN, <b>Or</b> ,	e country please detail all countries of CRS Information Portal <u>assistance/tax-identification-</u> CID number (TIN) is required to be
<ul> <li>(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax is</li> <li>For further guidance on Tax Resident http://www.oecd.org/tax/autom numbers/#d.en.347759</li> <li>NOTE: Under the Irish legislation provided unless:</li> <li>a) You are tax resident in a Juris</li> <li>b) You are tax resident only in a</li> </ul>	ies) ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD <i>natic-exchange/crs-implementation-and-</i> implementing the CRS, provision of a Tax sdiction that does not issue a TIN, <b>Or</b> , non-reportable Jurisdiction (i.e. Ireland o	e country please detail all countries of CRS Information Portal assistance/tax-identification- CID number (TIN) is required to be or the USA)
<ul> <li>(please confirm all Tax Residenci Please indicate your country of ta tax residence and associated tax is</li> <li>For further guidance on Tax Resident http://www.oecd.org/tax/autom numbers/#d.en.347759</li> <li>NOTE: Under the Irish legislation provided unless:</li> <li>a) You are tax resident in a Juris</li> <li>b) You are tax resident only in a</li> </ul>	ies) ax residence (if resident in more than one identification numbers ("TINs")). dence and TINs, please refer to the OECD <i>natic-exchange/crs-implementation-and-</i> implementing the CRS, provision of a Tax sdiction that does not issue a TIN, <b>Or</b> , non-reportable Jurisdiction (i.e. Ireland o	e country please detail all countries of CRS Information Portal assistance/tax-identification- CID number (TIN) is required to be or the USA)

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

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

Reason C – No TIN is required. (Note: This should only be selected if the domestic law of the relevant country / jurisdiction

<sup>1</sup>: e.g. (i) individual (ii) joint account, (iii) publicly-listed company, (iv) state-owned entity, (v) pension fund, (vi) regulated credit and financial institution, (vii) nominee company / intermediary company, (viii) private and unlisted companies, (ix) partnerships, (x) collective investment schemes, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify)



does not required the collection of the TIN issued by such country/jurisdiction)

## Section 4 – Type of Controlling Person

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

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

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



### \*Section 5: Declaration and Undertakings:

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

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

I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

# **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: <u>http://oecd.org/tax/automatic-exchange/</u> And on the Irish Revenue website -<u>https://www.revenue.ie/en/companies-and-charities/international-</u> <u>tax/aeoi/index.aspx</u>

*Authorised Signature:	
*Print Name:	 -
*Date: (dd/mm/yyyy):	
*Capacity (if Controlling Person):	



#### ANTI-MONEY LAUNDERING – KNOW YOUR CUSTOMER REQUIREMENTS

Under Irish legislation and supplemental Guidance covering anti-money laundering and the taxation of savings the Company and the Administrator are required to obtain the following documentation to verify the identity of all new applicants. This documentation should be provided with the application form. The documentation listed below may not cover all applications and the Company and the Administrator reserve the right to request additional documentation if required.

Should documents be provided in a language other than English, a certified English translation will be required.

Please note that the application may not be accepted until the Administrator is in receipt of all required anti-money laundering documentation, the original Application Form and the original banking details for the settlement of the redemption proceeds. In any event, redemption and dividend payments will not be processed until full anti-money laundering documentation has been received on the account and the Company and the Administrator reserve the right to take further action where full anti-money laundering documentation has not been received.

#### Documentation which may be required for all Retail Applicants

- 1. Personal Verification<sup>8</sup> ONE current official photographic document (Certified<sup>9</sup>)
- 2. Address Verification<sup>10</sup> ONE different address verification documents (within the previous 6 months) (Original or Certified)

#### Documentation which may be required for Designated Bodies in certain Countries<sup>11</sup>

- 1. Confirmation of Name and Address
- 2. Confirmation of Regulatory Body
- 3. Original Authorised Signatory List
- 4. Original Letter of Assurance (where investing as an intermediary)

#### Documentation which may be required for Non Designated Bodies

- 1. Confirmation of name, office address, principal business address and registered number
- 2. Confirmation of Regulatory Body (if applicable)
- 3. Certificate of Incorporation or Certificate to Trade (Certified)
- 4. Memorandum and Articles of Association (Certified)
- 5. Nature and purpose of the entity
- 6. List of Directors to include full name, dates of birth, occupation, residential and business addresses
- 7. Authorised Mandate or Board Resolution to establish the business relationship
- 8. Original Authorised Signatory List
- 9. ONE personal verification and ONE address verification documents for at least TWO directors **OR** ONE director and ONE authorised signatory (original or certified)
- 10. Verify the identity of all beneficial owners beneficially entitled to more than 25% of the entity's share capital or voting rights or otherwise exercises control over the management of the entity (if no beneficial owner holds more than 25%, verification of this is required (e.g. share register)).

#### Documentation which may be required for Pension Fund Accounts in certain Countries

- 1. Confirmation of name and address
- 2. Pension Scheme Rules
- 3. Constitutional / Formation Document (eg: Trust Deed)
- 4. Confirmation of registration from the relevant tax authorities or Pensions Board
- 5. Verification of the principal employer (if applicable)
- 6. Name, address and dates of birth of the officers/board members/trustees/directors/governors or equivalent

<sup>&</sup>lt;sup>8</sup> Acceptable Personal Verification documents are a certified copy of a Passport or a Driver's License or National Identity Card. The certified documents must be in date, show a picture of the person, full name, date of birth and signature of the person.

<sup>&</sup>lt;sup>9</sup> Verification documents must be *certified* by a suitable person/entity, such as; the Companies Registration Office (or the equivalent in the investors jurisdiction) with regard to incorporation documentation, a notary public, a police officer, an embassy/consular official, a chartered or certified public accountant, a practicing solicitor, any Designated Body. Documents should be stamped with the official stamp of the person, dated and signed by that person.

<sup>&</sup>lt;sup>10</sup> Acceptable Address Verification documents are any TWO of the following: electricity bill, gas bill, water bill, telephone bill, cable television bill, bank statement or credit card statement, social insurance documents, household/motor insurance certificates. Documents must originate from a different source, show the full name and residential address of the applicant and must be dated within 6 months of submission.

<sup>&</sup>lt;sup>11</sup> Australia, Austria, Belgium, Brazil, Canada, Denmark, Finland, France, Germany, Guernsey, Hong Kong, Iceland, India, Ireland, Italy, Japan, Jersey, Liechtenstein, Luxembourg, Isle of Man, Mexico, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom, United States, The Dutch overseas territories of Netherlands Aruba, Curacao, Sint Maarten, Bonaire, Sint Eustatius and Saba and The French overseas territories of Mayotte, New Caledonia, French Polynesia, Saint Pierre and Miquelon and Wallis and Futuna (please note this list is subject to change).



- 7. Identify verification for TWO officers/board members/trustees/directors/governors or equivalent
- 8. Evidence that the person representing the Pension Scheme is empowered to act (Certified)
- 9. Original Authorised signatory list

#### Documentation which may be required for a Nominee Company

- 1. Confirmation of Name and Address of Nominee Company
- 2. Original Authorised Signatory List for the Nominee Account
- 3. Confirmation of Name and Address of Parent of Nominee
- 4. Confirmation of Regulatory Body of Parent of Nominee
- 5. Original Authorised Signatory List of Parent
- 6. Proof of regulation (nominee / parent)
- 7. Original Letter of Assurance from Parent

#### Documentation which may be required for a Trust/Foundation/Charity

- 1. Confirmation of name, registered & principal business address
- 2. Evidence of charitable status (if applicable)
- 3. Constitutional / Formation document (eg: Trust Deed or equivalent)
- 4. Nature and purpose
- 5. ONE Personal Verification and TWO Address Verification documents for at least TWO trustees/directors/governors/board members or ONE trustee/director/governor/board member and ONE authorised signatory (original / certified)
- 6. ONE Personal Verification and TWO Address Verification documents for any settler (where appropriate)
- 7. ONE Personal Verification and TWO Address Verification documents for all beneficiaries who own at least 25% of the capital
- 8. Original Authorised Signatory List

Please note that the Administrator can only accept Application Forms from an entity that has legal capacity to enter into contracts on its own right and may require the constitutive document to legitimate legal status.

### AML CONFIRMATION FOR NOMINEES / INTERMEDIARIES

This confirmation can only be completed by designated bodies regulated for anti money-laundering purposes by the appropriate regulator in one of the following countries: Australia, Austria, Belgium, Brazil, Canada, Denmark, Finland, France, Germany, Guernsey, Hong Kong, Iceland, India, Ireland, Italy, Japan, Jersey, Liechtenstein, Luxembourg, Isle of Man, Mexico, Netherlands, Norway, Portugal, Singapore, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom, United States, The Dutch overseas territories of Netherlands Aruba, Curacao, Sint Maarten, Bonaire, Sint Eustatius and Saba and The French overseas territories of Mayotte, New Caledonia, French Polynesia, Saint Pierre and Miquelon and Wallis and Futuna (please note this list is subject to change).

DESCRIPTION OF INVESTOR	DESIGNATED BODY INVESTING AS AN INTERMEDIARY
RELATIONSHIP OF CONFIRMATION PROVIDER (REGULATED ENTITY) TO INVESTOR	INVESTOR

PARENT OF INVESTOR  $\Box$ 

# UNLESS THE FOLLOWING BOX IS TICKED THE ADMINISTRATOR WILL APPLY THE BELOW CONFIRMATION TO ANY SUBSEQUENT DESIGNATED ACCOUNTS IN THE NAME OF THE INVESTOR.

DO NOT APPLY THE BELOW CONFIRMATION TO SUBSEQUENT DESIGNATIONS  $\Box$ 



Name of Regulator

Address of Regulated Entity

We confirm that we are a designated body regulated for anti money-laundering purposes by the below regulator and hereby confirm the following in connection to the investor

- 1. <u>We / the investor\*</u> has performed the anti-money laundering and counter-terrorist financing identification for any parties on whose behalf the investor is purchasing shares ("underlying investors").
- 2. The evidence <u>we / the investor</u>\* has obtained to verify the identity of the underlying investors, and where appropriate, their beneficial shareholders, meets the requirements of our national anti-money laundering and counter-terrorist financing legislation and regulations.
- 3. We confirm that all documents and information, which we / the investor\* may have on <u>our / the investor's\*</u> files relating to the identity of each underlying investor will be sent to a competent authority as soon as practicable upon the competent authority's request.
- 4. We confirm that all documents and information, which we / the investor\* may have on <u>our / the investor's</u> files relating to the identity of each underlying investor will be sent to the Administrator of the Fund as soon as practicable upon its request.
- 5. <u>We / the investor\*</u> will retain these documents and information for a period of at least 5 years after the relationship with an underlying investor has ended.
- 6. <u>We / the investor</u>\* will take measures to ensure that the underlying investors are neither individuals nor institutions against whom sanctions have been imposed by the EU or United Nations or persons or entities that are included on the List of Specially Designated Nationals and Blocked Persons maintained by the U.S. Treasury's Department's Office of Foreign Asset Control ("OFAC").

Yours faithfully

Name:

Title:

Authorised Signatory of Regulated Entity.

This should be signed by an authorised member of the Compliance Department or Legal Department (please state position).

\* delete as applicable



# **PRIVACY NOTICE**

#### Introduction

The purpose of this document is to provide you with information on our use of your personal data in accordance with the EU data protection regime introduced by the General Data Protection Regulation (Regulation 2016/679, the "Data Protection Legislation").

In this document, "we", "us" and "our" refer to the Company and its affiliates and delegates.

#### Who this affects

If you are an individual investor, this will affect you directly. If you are an institutional investor that provides us with personal data on individuals connected to you for any reason in relation to your investment with us, this will be relevant for those individuals and you should transmit this document to such individuals or otherwise advise them of its content.

#### Your personal data

By virtue of making an investment in the Company and your associated interactions with us (including the initial application, and including the recording of electronic communications or phone calls where applicable) or by virtue of you otherwise providing us with personal information on individuals connected with you as an investor (for example directors, trustees, employees, representatives, shareholders, investors, clients, beneficial owners or agents), you will provide us with certain personal information which constitutes personal data within the meaning of the Data Protection Legislation. We may also obtain personal data on you from other public sources.

This includes the following information relating to you and/or any individuals connected with you as an investor: name, residential address, email address, contact details, corporate contact information, signature, nationality, place of birth, date of birth, tax identification, credit history, correspondence records, passport number, bank account details, source of funds details and details relating to your investment activity.

#### How we may use your personal data

The Company, as the Data Controller (as defined under the Data Protection Legislation), may collect, store and use your personal data for lawful purposes disclosed below:

(i) to reflect your ownership of shares in the Company (i.e. where this is necessary for the performance of the contract to purchase shares in the Company or to process redemption, conversion, transfer and additional subscription requests or the payment of distributions);

(ii) to discharge our anti-money laundering obligation to verify the identity of our customers (and, if applicable their beneficial owners) or for prevention of fraud or for regulatory or tax reporting purposes or in response to legal requests or requests from regulatory authorities (i.e. where this is necessary for compliance with a legal obligation to which we are subject); and/or

(iii) for direct marketing purposes (that is, us providing you with information on products and services) or for quality control, business and statistical analysis or for tracking fees and costs or for customer service, training and related purposes (i.e. where this is necessary for the purposes of the legitimate interests of us or a third party and such legitimate interests are not overridden by your interests, fundamental rights or freedoms and provided that we are acting in a fair, transparent and accountable manner and have taken appropriate steps to prevent such activity having any unwarranted impact on you and also noting your right to object to such uses, as discussed below).

Maples Fund Services (Ireland) Limited the "Administrator" may use your personal data where this is necessary for compliance with a legal obligation to which it is directly subject (i.e. to comply with applicable law in the area of anti-money laundering and counter terrorist financing, where required for global tax reporting purposes or where mandated by a court order or regulatory sanction). The Administrator, in respect of this specific use of personal data, acts as a data controller.

Additionally, SMT Trustees (Ireland) Limited, the "Depositary" may use your personal data or the personal data of individuals connected with you as an investor (for example directors, trustees, employees, representatives, shareholders, investors, clients, beneficial owners or agents) where it is necessary for compliance with a legal obligation (i.e. to comply with anti-money laundering/counter terrorist financing legislation or in the discharge of its statutory oversight and monitoring obligations). The Depositary, in respect of this specific use of personal data, acts as a Data Controller.

The Depositary may share the personal data with its delegates and agents. Where those delegates are located outside the EEA or a third country in respect of which the European Commission has not issued a finding of adequacy with regard to data protection, appropriate model clauses will be implemented. The personal data will be held by the Depositary in accordance with anti-money laundering legislation as relevant. In general, the Depositary will hold personal data, which it has in the discharge of its statutory oversight and monitoring obligations for a period of seven years, unless it is obliged to hold it for a longer period under law or applicable regulations or otherwise.



The rights which you have in relation to your personal data as described above will apply directly in respect of the Depositary to the extent that the Depositary acts as Data Controller.

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

#### Why we may transfer your personal data

In certain circumstances we and/or our authorised delegates may be legally obliged to share your data and other financial information with respect to your interest in the Company with the Irish Revenue Commissioners and they, in turn, may exchange this information with foreign tax authorities including tax authorities located outside the EEA.

We anticipate that the following affiliates and delegates will process your personal data on our behalf or, in the case of the Depositary, on its own behalf as a controller in its own right and this may include certain entities located outside the EEA:

- the Administrator;
- the Company's investment manager and distributor SouthernSun Asset Management LLC;
- the Depositary;

#### The data protection measures we take

Any transfer of personal data by us or any of our duly authorised delegates or the Depositary outside the EEA shall be subject to appropriate safeguards being in place in accordance with the conditions in the Data Protection Legislation. Please contact us if you wish to obtain more information on the appropriate safeguards. See "Getting in touch" below.

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

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

#### Your data protection rights

You have certain rights regarding our use of your personal data summarised as follows:

- the right to access your data (in an easily readable form);
- the right to examine and correct your data;
- the right to data portability;
- the right to restrict the use of your data;
- the right to withdraw any consent given to the processing of your data (where applicable);
- the right to receive information regarding any entities we disclose your data to;
- the right to lodge a complaint with the Office of the Data Protection Commissioner (our lead supervisory authority).

You also have the right to object to the processing of your data where we have considered this to be necessary for the purposes of our legitimate interests.

Please note that the right for your data to be erased (the "right to be forgotten") that applies in some contexts is not likely to be applicable to most, if not all, of the personal data we hold, given the specific nature of the purposes for which we use the data, as described above.

#### Our retention of your personal data

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

#### Getting in touch

The Company is not required to designate a data protection officer. However, should you have any queries or wish to discuss your data protection rights with us, please contact <u>compliance@southernsunam.com</u>.