

COMPLETION INSTRUCTIONS:

	Sections				
	I	II	III	IV-V	W-9
All Non-US persons	✓	✓	✓	✓	
US Persons	✓	✓		✓	✓

This tax booklet is required for purposes of confirming the US/NON-US status and the tax residence of all individuals who are either:

- i. "Beneficial Owners" of the account according to the US tax principles; or
- ii. "Controlling Persons" of an entity that qualifies as Passive Non-Financial Foreign Entity (NFFE) for FATCA purposes or Passive Non-Financial Entity account holder or a Professionally Managed Investment Entity resident in a non-participating jurisdiction for Automatic Exchange of Information purposes; or
- iii. "Relevant Persons" which means any natural person, that is not a Beneficial owner nor a controlling person but who is linked to a legal structure, trust or equivalent legal arrangement through ownership, control or any other capacity (e.g. settlor, beneficiary, person having control or equivalent). Please note that if you are completing this form as a Relevant Person, you will not be considered by the Fund as a reportable person For FATCA & Automatic Exchange of Information purposes.

Account holder: _____

I. Identity of the Beneficial Owner for Tax Purposes

I hereby provide the following information and make the following statements concerning (i) all the accounts currently open with FundPartners Solutions (Europe) S.A. ("FPS"), if any, that I am deemed a Beneficial Owner, Controlling Person or Relevant Person of, as well as (ii) any account(s) that may be opened at FPS on the basis of the present form (collectively hereafter referred to as the "Account(s)").

First Name(s) _____

Last Name(s) _____

Date of Birth

Place of Birth

(dd/mm/yyyy)

City

State or Province

Country

Citizenship(s) – List all

Actual address of domicile¹

No. Street

Postal or Zip Code

City

State or Province

Country

I duly confirm that the above address of domicile is my sole permanent residence address for tax purposes (If not, please indicate below your other country of tax residence).

➔ Address in another country of tax residence, if any²

Address

No. Street

Postal or Zip Code

City

State or Province

Country

¹The term "actual address of domicile" is the residence address in the country where you have a permanent home and where the closest personal, family and economic ties are established (i.e. the centre of vital interests). Do not indicate P.O. boxes.

²Please indicate jurisdiction(s), outside the country of your actual address of domicile, where you are fully liable for tax by reason of dual domicile, residence or professional activities. Do not indicate here countries where you are subject to limited tax liability (e.g. tax liability limited to the ownership of real estate alone). In case of doubt, please consult a tax advisor.

II. FATCA Self-Certification of US/Non-US Tax Status

I hereby make the following declarations to FPS. (Tick the boxes that apply in response to the following questions)

1 I am a U.S. citizen

(Sole, dual or multiple citizenships)

Yes

No

2. I was born in the U.S.

(including any State, the District of Columbia, and certain U.S. Territories such as Puerto Rico, Guam, American Samoa, Northern Mariana Islands, U.S. Virgin Islands.)

Yes

No

If the answer to (2) is "Yes", do you still have U.S. citizenship?

Yes

No

3. I obtained a U.S. Green Card

(Irrespective of the expiry date. A Green Card means a U.S. alien registration card as a lawful permanent resident of the U.S.)

Yes

No

If the answer to (3) is "Yes", do you still have a Green Card (i.e. you have not formally surrendered it to the US authorities)?

Yes

No

4. I am a U.S. tax resident by virtue of my presence in the United States

(Under the "Substantial Presence Test" a person is considered a U.S. tax resident if the person was physically present in the U.S. at least 31 days during the current year and 183 days during the 3-year period that includes the current year and the 2 previous years. When calculating the substantial presence test, count (i) all days in the current year; (ii) 1/3 of the days in the first year before the current year; and (iii) 1/6 of the days in the second year before the current year. Days present in the U.S. may not count if the individual was issued certain types of visas.)

Yes

No

Required forms for FATCA purposes:

If you answered "Yes" to any of the questions above, and you did not tick a "No" box in the third column, please complete Section III and sign page 5 and complete and sign the W-9 on page 7.

→ Complete Section III and sign page 5
→ Complete and sign form W-9 on page 7

If you answered "No" to the questions in the second column only, please complete Sections III and IV and sign page 5.

→ Complete Sections III and IV
→ Complete and sign page 5

If you answered "No" to any of the questions in the third column, please complete Sections III and IV and sign page 5 and provide a Certificate of Loss of Nationality (if you were born in the U.S.) or a Form I-407 (if you previously held a Green Card).

→ Complete Sections III and IV
→ Complete and sign page 5
→ Provide Certificate of Loss of Nationality OR Form I-407 (Green Card holders)

III. Country(ies) of residence for tax purposes and related Taxpayer Identification Number(s)

Please indicate the Individual's country of tax residence (if resident in more than one country, please list all countries and associated Tax Identification Numbers ("TIN")).

If the Individual is unable to provide a TIN for a specific country of tax residence, please include the appropriate reason A, B or C in the right column of the below table:

Reason A: No TIN is issued by the Individual's country of tax residence to its residents.

Reason B: No TIN is required (to be selected only if the authorities of the country of tax residence do not require the TIN to be disclosed).

Reason C: The Individual is unable to provide a TIN or equivalent number. Please specify the reason in the last column of the below table.

Country(ies) of tax residence	Tax Identification Number (TIN)	If no TIN available enter reason A,B or C	If you have selected reason C, explain why you are unable to provide a TIN

TO BE COMPLETED BY ALL INDIVIDUALS

IV. Claim of Tax Treaty Benefits with the United States

Please tick the below box only if you are a non-US Beneficial Owner according to the US tax principles and if you want to claim the benefits of the Double Tax Treaty with the United States and your country of tax residence.

The term Beneficial Owner means an individual direct account holder or an individual who is partner of a partnership, grantor (settlor) of a grantor trust, beneficiary of a simple trust or an individual whose behalf a non qualified intermediary is acting.

The Beneficial Owner named in Section I certifies the following:

- As Beneficial Owner resident of the country mentioned under Section I above within the meaning of the income tax treaty between the United States and that country, I hereby claim the benefits of this tax treaty.

Should you have more than one country of tax residence, please specify which country you would like to invoke for the Treaty claim: _____.

TO BE COMPLETED BY NON-US BENEFICIAL OWNERS

V. Tax Disclosure and Representations

1. Confirmation of tax disclosure by Beneficial Owners

I confirm that all the Accounts at FPS are fully disclosed (if applicable) to the relevant tax authorities in my country(ies) of tax residence in accordance with the applicable tax laws and regulations. I further confirm that I will continue to comply with any and all tax obligations (if applicable) in relation to the Account(s).

I undertake to provide documentation to corroborate the above confirmation should FPS so request from time to time.

Furthermore, in accordance with the FPS's General Business Conditions, I hereby understand and expressly accept that it is solely my responsibility to comply with any and all tax obligations that I may be subject in relation to the Account(s) at FPS and to bear the consequences thereof.

Note: This section does not apply to relevant Person or Controlling Persons who have no tax obligation linked to the entity holding the Account(s), such as, but not limited to, trustees, foundation board members or protectors.

2. Changes of Circumstances

I undertake to inform FPS, at my own initiative and within 30 days, of any change in circumstances in respect of any of the matters covered in this form. In the event of a change in circumstances, I will provide any new or updated forms, documents and certifications as required by FPS within the stipulated deadline. If I do not, information related to the Account(s) may need to be disclosed to relevant authorities in other countries.

3. Accuracy of Information Provided

I understand and accept that providing any false, misleading or incomplete information is likely to harm FPS as well as it may constitute an infringement to the applicable law for which I may be liable for false declarations and sentenced to monetary penalties if prescribed by the local law. Therefore, I agree to release, indemnify and hold FPS and the other entities of the Group, as well as their respective employees, governing bodies and agents harmless from any liability, claim, fee, cost or damage of any kind (including any financial sanctions, fines, legal costs or lawyer's fees), in accordance with FPS's General Business Conditions.

4. Personal Data Protection

I understand that all personal data contained in this document and/or related to the account(s) that will be treated in accordance with this Form will be processed according to the Pictet Group's Data Protection Privacy Notice.

VI. Signature

I confirm, to the best of my knowledge and belief, that the information provided in Sections above is true, correct and complete.

Date: _____ Signature of the Individual
(or authorized signatory): _____

Print first and last name of the signatory:

Request for Taxpayer Identification Number and Certification

Give Form to the
requester. Do not
send to the IRS.

► Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ► _____

Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is **not** disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.

Other (see instructions) ► _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions. Requester's name and address (optional)

6 City, state, and ZIP code

7 List account number(s) here (optional)

Print or type.
See Specific Instructions on page 3.

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Note: If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number

				-				-				
--	--	--	--	---	--	--	--	---	--	--	--	--

or

Employer identification number

				-								
--	--	--	--	---	--	--	--	--	--	--	--	--

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here Signature of U.S. person ► Date ►

