

**CERNO INVESTMENT FUNDS ICAV (the "ICAV")**  
**Application Form for CERNO UNCONSTRAINED FUND (the "Fund")**

<p>This Application Form, which acts as an account opening form, should be read in context of and together with the latest Prospectus of the ICAV and the Supplement of the Fund (collectively referred to as the "<b>Prospectus</b>"), and save where otherwise defined in this Application Form, all capitalised terms shall have the same meaning as in the Prospectus. Please note that separate forms are required for subsequent (repeat) subscriptions and redemptions of Shares. These forms can be obtained from the Administrator.</p> <p><b>Instructions:</b>  <b>ALL investors must complete sections 1 to 6 and section 12</b>  <b>Individuals only must complete section 7</b>  <b>Entities only must complete section 8</b>  <b>Non-Irish residents only must complete section 9</b>  <b>Irish residents only must complete section 10</b>  <b>Irish residents who are not Exempt Irish Residents only (as defined in the Prospectus) must complete section 11</b></p>	<p>Mail: <b>MaplesFS</b>  32 Molesworth Street, Dublin 2, Ireland</p> <p>Telephone: <b>353 1 697 3219</b>  Fax: <b>353 1 697 3390</b>  Email: <a href="mailto:investorservicesdublin@maplesfs.com">investorservicesdublin@maplesfs.com</a></p>
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**1. APPLICANT DETAILS (Please use BLOCK CAPITALS) \***

<input type="checkbox"/> Individual	<input type="checkbox"/> Joint Applicant
<input type="checkbox"/> Corporation	<input type="checkbox"/> Nominee
<input type="checkbox"/> Partnership/Trust	<input type="checkbox"/> Fund of Funds
<input type="checkbox"/> Non-Profit Organisation (Foundations)	<input type="checkbox"/> Financial Intermediary
<input type="checkbox"/> Other	
Registered Name(s) of all Applicants (including Joint Applicants):	
Occupation <sup>1</sup>	
Full Residential or Registered Address:	
Correspondence <sup>2</sup> address if different:	
Contact Name:	Tel No:
Email:	Fax No:
Send Contract Note by:	<i>(Email, Mail, or Fax)</i>
Intermediary:	Intermediary/Fax:
Regulator of Intermediary:	Jurisdiction of Intermediary:
	Intermediary/Email:
	Webpage of intermediary showing evidence of regulation:

\* should there be a need for further requirements or additions please use the space at the end of the form.

<sup>1</sup> Applicable to Individuals only

<sup>2</sup> All regular correspondence will be distributed via email / fax; please contact the Administrator if this causes significant issues for the Applicant.

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**2. INVESTMENT DETAILS**

<input type="checkbox"/> <b>Class A Share Class</b> <b>Minimum initial investment:</b> GBP5,000	<input type="checkbox"/> <b>Class B Share Class</b> <b>Minimum initial investment:</b> GBP1,000,000	<input type="checkbox"/> <b>Class C Share Class</b> <b>Minimum initial investment:</b> EUR5,000	<input type="checkbox"/> <b>Class D Share Class</b> <b>Minimum initial investment:</b> USD5,000
<b>Insert subscription amount in numbers GBP/USD/EUR:</b>		<b>Insert subscription amount in words:</b>	

**3. SUBSCRIPTION BANK DETAILS**

<b>For GBP SEND TO:</b>	
Correspondent Bank Name:	<b>BARCLAYS BANK PLC</b>
Correspondent Bank BIC:	<b>BARCGB22</b>
Correspondent Bank Clearing Code:	<b>20-32-53</b>
Beneficiary Bank Name:	<b>BROWN BROTHERS HARRIMAN &amp; CO</b>
Beneficiary BIC:	<b>BBHCUS33</b>
Beneficiary Clearing Code:	<b>N/A</b>
Beneficiary Account Number: (at Correspondent Bank)	<b>53623157</b>
Final Beneficiary Account Name:	<b>CERNO UNCONSTRAINED FD COLLEC.</b>
Final Beneficiary BIC Code:	<b>N/A</b>
Final Beneficiary Account Number:	<b>6387278</b>
<b>For USD - CHIPS SEND TO:</b>	
Correspondent Bank Name:	<b>N/A</b>
Correspondent Bank BIC Code:	<b>N/A</b>
Correspondent Bank Clearing Code:	<b>N/A</b>
Beneficiary Bank Name:	<b>BROWN BROTHERS HARRIMAN &amp; CO</b>
Beneficiary Bank BIC Code:	<b>N/A</b>
Beneficiary Bank Clearing Code:	<b>0480</b>
Beneficiary Account Number: (at Correspondent Bank)	<b>N/A</b>
Final Beneficiary Account Name:	<b>CERNO UNCONSTRAINED FD COLLEC.</b>
Final Beneficiary BIC Code:	<b>N/A</b>
Final Beneficiary Account Number:	<b>6387278</b>
<b>For USD - FEDWIRE SEND TO:</b>	
Correspondent Bank Name:	<b>CITIBANK N.A., NEW YORK</b>
Correspondent Bank BIC Code:	<b>CITIUS33</b>
Correspondent Bank Clearing Code:	<b>021000089</b>
Beneficiary Bank Name:	<b>BROWN BROTHERS HARRIMAN &amp; CO.</b>
Beneficiary Bank BIC Code:	<b>N/A</b>
Beneficiary Bank Clearing Code:	<b>N/A</b>
Beneficiary Account Number: (at Correspondent Bank)	<b>09250276</b>
Final Beneficiary Account Name:	<b>CERNO UNCONSTRAINED FD COLLEC.</b>
Final Beneficiary BIC Code:	<b>N/A</b>
Final Beneficiary Account Number:	<b>6387278</b>
<b>For EUR SEND TO:</b>	
Correspondent Bank Name:	<b>HSBC BANK PLC, LONDON</b>
Correspondent Bank BIC Code:	<b>MIDLGB22</b>
Correspondent Bank Clearing Code:	<b>N/A</b>
Beneficiary Bank Name:	<b>BROWN BROTHERS HARRIMAN &amp; CO.</b>
Beneficiary Bank BIC Code:	<b>BBHCUS33</b>
Beneficiary Bank Clearing Code:	<b>N/A</b>
Beneficiary Account Number: (at Correspondent Bank)	<b>37860431</b>

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Final Beneficiary Account Name:	<b>CERNO UNCONSTRAINED FD COLLEC.</b>
Final Beneficiary BIC Code:	<b>N/A</b>
Final Beneficiary Account Number:	<b>6387278</b>

**Notes:**

1. Cleared subscription monies to be received no later than 12:00 noon (Irish time) 4 Business Days after Dealing Deadline.<sup>3</sup>
2. If payment in full in cleared funds is not received within the required number of Business Days any provisional allotment of shares may be cancelled.

<sup>3</sup> **Walkers note:** Administrator to confirm that the subscription procedure outlined in the supplement is correct. Once confirmed these details can be included.

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**4. CLIENTS BANK DETAILS<sup>4</sup>**

Intermediary Bank:	
SWIFT Code:	
Bank Name:	
Branch Name:	
IBAN:	
BIC:	
Account Name:	
Account Number:	
Sort Code:	

**Note: No third party payments will be undertaken. A request to change bank account details in future must be made in writing to the administrator, requiring an original signed instruction, and must be accompanied by a bank statement or banker's reference.**

**5. REPRESENTATIONS, DECLARATIONS AND WARRANTIES**

**I/We represent, warrant and declare that:**

GENERAL	
<p>1. I/we hereby acknowledge as part of this application that I/we have been provided with in good time prior to completing this Application Form and have read and understood the contents of the Prospectus of the ICAV, applicable Fund Supplement, the instrument of incorporation of the ICAV and key investor information document(s) ("KIID(s)") and where available the most recent annual or half-year reports and accounts for the ICAV applicable to the Fund (the "Fund Documentation") and furthermore that this application is based solely upon the terms thereof, and subject to the provisions of the ICAV's instrument of incorporation. I/we acknowledge that I am/we are aware of the potential risks associated with this investment and where appropriate have sought professional advice on matters of taxation and such other consequences applicable to the investment.</p>	<p>2. I/we confirm that I am/ we are 18 years of age or over (<b>delete if you are not a natural person</b>).</p> <p>I am/We are not making this application on behalf of any person under the age of 18 years.</p> <p>3. <b>If you are joint applicants</b> – We direct that, on the death of one of us, the Shares for which we are applying shall be held in the name of and to the order of the survivor(s) or the executor(s) or administrator of the last such survivor (<b>delete if you are not a natural person or you are a sole investor</b>).</p>
<p>4. I/we hereby agree to indemnify and hold harmless the ICAV, the Manager, the Administrator, the Depositary, the Investment Manager, the Investment Advisor and their respective directors, officers and employees and other Shareholders against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) suffered by them which may result directly or indirectly, from: (i) any misrepresentation or breach of any representation, declaration, warranty, condition covenant, or agreement set forth herein or in any document delivered to by me/us to the ICAV or the Administrator; (ii) me/us acquiring or holding Shares in the Fund where, by virtue of my / our holding, I am / we are in breach of the laws of any competent jurisdiction; and (iii) the Administrator or the ICAV acting on an instruction reasonably believed to be genuine in accordance with the declaration at number 5.</p>	<p>5. The Administrator, the Manager and the ICAV are each authorised and instructed to accept and execute any instructions in respect of the Shares to which this Application Form relates given by me/us in written form, by email to [●] or by facsimile to +[●] with the originals to follow to the Administrator's address. The ICAV, the Manager and the Administrator will not be responsible or liable for the authenticity of instructions received from us or any authorised person and may rely upon any instruction in good faith from any such person representing himself to be a duly authorised person reasonably believed to be genuine.</p>
<p>6. I/we acknowledge that the Administrator will refuse to process a redemption request until the Administrator has received an original of this Application Form and until all required anti-money documentation has been received by the Administrator</p>	<p>7. I/we accept such lesser number of Shares if any, than may be specified above in respect of which this application may be accepted.</p>
<p>8. I/we agree to notify the ICAV immediately if I/we become aware that any of the representations and declarations made is no longer accurate and complete in all respects. I/we agree immediately either to sell or to tender to the ICAV for redemption of a sufficient</p>	<p>9. I/we understand that the confirmations, representations, declarations and warranties made herein are continuing and apply to all subsequent purchases of Shares by me/us in the Fund and I/we agree to provide on request such certifications, documents or other evidence as the ICAV or the Administrator</p>

<sup>4</sup> **Walkers note:** This is in relation for where the sale proceeds are to be sent and those electing for income shares to receive their dividend payments (Please note that if no option is indicated, distribution and dividend payments will be reinvested).

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<p>number of Shares to allow the representations to be made again.</p>	<p>may reasonably require to substantial such representations. I/we hereby confirm that for any subsequent investments I/we will obtain and read the latest version of the appropriate Fund Documentation prior to each subscription</p>
<p><b>10. If you are an intermediary:</b> I/we confirm that:</p> <ul style="list-style-type: none"> <li>(i) that evidence of verification has been obtained and recorded in accordance with the laws of the my/our jurisdiction as identified on page 1;</li> <li>(ii) the names of our clients have been compared against the following sanction lists: (a) EU; (b) UN and (c) OFAC;</li> <li>(iii) that all documentary evidence of verification process will be retained for at least 6 years after the client has redeemed in full;</li> <li>(iv) this documentary evidence of verification will be made available on demand; and</li> <li>(v) I will provide such documentary support and comfort letters as may be required pursuant to applicable law on request of the Administrator;</li> <li>(vi) prior to accepting any order for the acquisition of Shares, I/we will ensure that the investor will be provided with the current KIID for the relevant Share Class in the Fund as well as all other Fund documentation identified in the declaration at point 1 above.</li> </ul> <p><b>(If you are not an intermediary then please put a line through Part 10)</b></p>	<p><b>11. Receipt of the KIID by means of a website:</b> I/we represent and acknowledge that:</p> <ul style="list-style-type: none"> <li>(i) I/we have been offered the choice of receiving the Prospectus, Supplement and the KIID on paper and in electronic form by means of a website or by email and hereby specifically consent to receiving the KIID in electronic form by email or by accessing the latest version of the document online at [●] (or such other website as may be notified to me/us from time to time) and acknowledge that I/we shall be deemed to have been provided with an up-to-date KIID by means of the website in good time before any subsequent/future subscriptions.</li> <li>(ii) I/we received or accessed by electronic means the KIID.</li> <li>(iii) The KIID shall be reviewed at least every 12 months. I/We agree that I/we will inspect the KIID by accessing the website in good time before making any subsequent and/or future subscriptions for Shares in any Class of the Fund. I/We agree that I/we bear sole responsibility for ensuring that I/we have inspected the up-to-date version of the KIID and that, in any event.</li> </ul> <p>12. I/we may at any time request a hard copy of any such documentation from the Fund free of charge and/or revoke, in writing or other authorised manner, the consent given to receive such information electronically or to subscribe or redeem Shares of the Fund electronically.</p>
<b>TAXATION</b>	
<p>13. I/we agree to provide to the ICAV and the Administrator at such times as each of them may request such declarations, certificates or documents as each of them may reasonably require in connection with this investment for the purposes of tax and reporting requirements including those required:</p> <ul style="list-style-type: none"> <li>(a) under (i) sections 1471 to 1474 of the U.S. Internal Revenue Code of 1986 or any associated regulations, (ii) any treaty, law, regulation or other official guidance of any other jurisdiction, or relating to an intergovernmental agreement between the U.S. and any other jurisdiction, which (in either case) facilitates the implementation of any law or regulation referred to in paragraph (i) above, or (iii) any agreement pursuant to the implementation of any treaty, law or regulation referred to in paragraph (i) or (ii) above with the IRS, the U.S. government or any governmental or tax authority in any other jurisdiction ("FATCA"); and</li> <li>(b) under the OECD Standard for Automatic Exchange of Financial Account Information in Tax Matters, Council Directive 2011/16/EU (as amended by Council Directive 2014/107/EU), any guidance or documentation published by the OECD, as applicable, and any domestic legislation, policy, statement, precedent or guidance relating to the implementation of the CRS in Ireland, as applicable, ("CRS").</li> </ul> <p>Should any information furnished to any of the ICAV and the Administrator under (a) and (b) above (the "Tax Information") become inaccurate or incomplete in any way, I/we hereby agree to notify the ICAV or the Administrator immediately of any such change and further agree to</p>	<p>14. By providing the Tax Information, I/we represent and warrant the completeness and accuracy of such information (as at the date of submission) and authorise the ICAV to act upon such information in good faith, including, but not limited to, disclosing or submitting such information to the Irish tax authorities. I/we will, on demand, hold the ICAV harmless from any liability resulting from the my/our failure to provide complete and accurate Tax Information</p> <p>I/we hereby acknowledge that if I/we fail to provide the Tax Information on a timely basis, I/we may be subject to 30% U.S. withholding tax (in respect of FATCA) on the investor's share of "withholdable payments" (as defined for purposes of FATCA) received by the ICAV.</p> <p>I/we hereby acknowledge that if I/we fail to provide the Tax Information and such failure results in the ICAV being unable to comply with its obligations under FATCA and CRS, the ICAV may exercise its right to completely redeem an applicant (at any time upon any or no notice). I/we further acknowledge and agree to indemnify the ICAV and its other investors for any losses resulting from our failure to meet its obligations under this Section, including any U.S. withholding tax imposed on the ICAV.</p> <p>I/we hereby acknowledge that under the CRS, the ICAV and/or the Administrator, as applicable, will be required to share my/our personal data (e.g. name, address, taxpayer identification number, jurisdiction of residence and, in the case of individual investors, place and date of birth) (including financial information with respect to my/our interests in the Shares (e.g. account number, account balance or value at year end and payments made with respect to the account during the calendar year)) with the Irish Revenue Commissioners. The Irish Revenue Commissioners may, in turn, exchange this information with foreign tax authorities (including foreign tax authorities located outside the EEA). Please consult the AEOI</p>

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request the redemption of Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the ICAV.	(Automatic Exchange of Information) webpage on the Irish Revenue Commissioners' website at <a href="http://www.revenue.ie/en/business/aeoi/index.html">http://www.revenue.ie/en/business/aeoi/index.html</a> for further information in this regard.
<b>DATA PROTECTION</b>	
<p>15. I/We consent to personal information obtained in relation to me/us being handled by the Administrator, the Manager, the ICAV, the Depositary or the Investment Manager and their delegates, agents or affiliates in accordance with the Irish Data Protection Acts 1988 to 2003. Information in relation to me/us will be held, used, disclosed and processed for the purposes of (a) managing and administering my/our holdings in the Fund and any related account on an ongoing basis; (b) for any other specific purposes where I have given specific consent to do so; (c) to carry out statistical analysis and market research (d) to comply with any applicable legal, tax or regulatory obligations including legal obligations under company law, tax law and anti-money laundering legislation and (e) for disclosure and transfer whether in Ireland or elsewhere (including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in Ireland) to third parties including my/our financial adviser (where appropriate), regulatory bodies, taxation authorities, auditors, technology providers or to the Fund and its delegates and its or their duly appointed agents and any of their respective related, associated or affiliated companies for the purposes specified above; (f) For other legitimate business interests of the Fund. I/We hereby acknowledge my/our right of access to and the right to amend and rectify my/our personal data, as provided herein. I/We understand that the Fund is a data controller and will hold any personal information provided by me/us in confidence and in accordance with the Data Protection Acts 1988 to 2003. The Administrator may only transfer personal data outside of the EEA by using an EU-approved 'model contract' by means of which the non-EEA data receiver agrees to abide by the instructions of the data controller (the Administrator), and agrees to comply with security measures which are appropriate to the circumstances of the data transfer, and which are specified in the contract itself.</p>	<p>16. I/We consent to the recording of telephone calls that I/we make to and receive from the Administrator, the Manager, the ICAV or the Investment Manager and their delegates or duly appointed agents and any of their respective related, associated or affiliated companies for record keeping, security and/or training purposes. I/We consent to the ICAV, the Manager or the Investment Manager sending information about other investment services to me/us by letter, telephone or other reasonable means of communication. I/We understand that I/we have a right to request not to receive such information.</p> <p>17. The Administrator may and will hold all or part of the information in relation to your shareholding in accordance to legal and regulatory requirements even after you have fully redeemed from the fund.</p>

**6. ANTI-MONEY LAUNDERING DOCUMENTATION REQUIREMENTS**

**FOR INDIVIDUALS AND JOINT INVESTORS:**

**Note:** The Administrator is located in Ireland. Under the legislative regime in Ireland for the prevention of money laundering and terrorist financing, it is part of the responsibilities of the Fund to have in place requisite systems to prevent money laundering and terrorist financing. Customer due diligence is required under the Irish Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 and 2013 (together the "Act") which includes: (i) verification of the identity of each investor and/or each beneficial owner (in the case of an investor investing on a nominee basis) based on a risk based approach; (ii) verification of the identity of the source of the subscription payment; (iii) obtaining information on the purpose and nature of the business relationship; and (iv) ongoing monitoring of the business relationship. The particular requirements for verification of each investor's identity will be determined by the jurisdiction where the Administrator or its delegate is located. Depending on its risk assessment of an investor and in accordance with the Act, the Administrator reserves the right to request additional documentation as may be required from time to time. Enhanced due diligence is required in circumstances where a higher risk of money laundering and/or terrorist financing becomes apparent following a risk based approach, including where an investor is a non-resident politically exposed person ("PEP") as defined by the Act.

To comply with the Fund's anti-money-laundering procedures, the investor must fulfil one of the three options listed below. Please indicate which option the investor is fulfilling by checking the applicable box.

- Option 1:** The investor is introduced by (or the subscription is made through) a relevant third party within the meaning of the Act and that the relevant third party provides written assurance to the Fund and/or the Administrator that it has established the identity of the investor and holds evidence of that identity, by completing and delivering to the Administrator, a letter in the form attached at Exhibit 1.

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**Option 2:** The investor is a specified customer as defined by section 34(5) of the Act and subject to section 34(3) of the Act. Please provide evidence that you fall within one of the categories of specified customer.

**Option 3:** The investor provides the following documentation (as is relevant to their status) with this Subscription Agreement.

## **Individual investors:**

A certified/notarised copy of a current government issued form of picture identification (e.g. a valid passport, national identity card or driver's license), showing a clear photo, legible signature, number and country of issuance, issue and expiration dates, full name and date of birth.

- (i) Two independent proofs of current residential address as below:
- (A) Original or certified copy of utility bill (not more than three months old); and
  - (B) Original or certified copy of bank statement or bank reference (not more than 3 months old).

## **Entity investors:**

- (i) A certified/notarised copy of the investor's certificate of incorporation/formation/registration (as applicable).
- (ii) A certified/notarised copy of the investor's memorandum and articles of association/bylaws/ partnership agreement/LLC agreement/trust deed (as applicable).
- (iii) Details of the nature of the investor's business. In the case of a trust, details of the general nature/purpose of the trust and of the source of funds of the trust, including the name of the settlor and how the settled funds were generated.
- (iv) A certified/notarised copy of the board/trustee resolution (or equivalent) authorising the investment and conferring authority on the authorised signatories on the investment account and an original or certified copy of a list of authorised signatories.
- (v) A certified/notarised copy of the register/list of directors/general partners/managing members/trustees (as applicable) or certificate of incumbency.
- (vi) A certified/notarised copy of identification evidence for at least 50% of the directors/general partners/managing members/trustees (as applicable) of the investor (OR where investor is a large philanthropic organization, two authorised signatories).
- (vii) A certified/notarised copy of the register/list of beneficial owners of the investor with percentage ownership or number of shares held.
- (viii) A certified/notarised copy of identification evidence for the principal beneficial owners of the investor, being any person or entity holding an interest of 10% or more (OR for trusts only, a list of beneficiaries with an interest of 10% or more (including addresses)). If more than 25% of the share capital is owned by any individual, evidence of the identity of the individual should also be provided, as above.

The signatory undertakes that they will promptly notify the Administrator in writing of any changes from time to time to the business activities, directors, officers, shareholders, partners, trustees, settlors, other controllers or beneficial ownership.

The documentation listed below may not cover all applications and the ICAV and the Administrator reserve the right to request additional documentation if required

## **IMPORTANT: PLEASE NOTE THE FOLLOWING**

- All certified/notarised documents must bear the name, position, capacity and original stamp/signature of the certifier/notary public, together with a contact address and/or phone number. Photocopies or facsimile copies of certified/notarised documents are not acceptable.
- Each document should be marked with the word "original seen" or "true copy of original document".
- Suitable certifiers include persons such as a notary public, lawyer, accountant, a director or manager of a Designated Body in a FATF jurisdiction (e.g. a bank), a member of the judiciary, embassy or consular staff.
- Where documents are not in English, a notarised translation is required

The Administrator reserves the right to request such additional information as is necessary to verify the identity of the investor during the time of the investment in the fund. The Company may refuse to accept any application to subscribe if a prospective investor delays in producing or fails to produce any information required for the purpose of verification as requested by the Administrator and, in that event, any funds received will be returned without interest to the account from which the moneys were originally debited. The Company and the Administrator shall not be held liable in this regard.

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**Exhibit 1**

**FORM LETTER REQUIRED UNDER OPTION 1**

LETTER FOR COMPLETION BY THE RELEVANT THIRD PARTY INTRODUCING SUBSCRIBER OR THROUGH WHICH  
SUBSCRIPTION IS MADE

*[To be placed on letterhead of the relevant third party remitting payment.]*

[Date]

**Via mail and facsimile/email**

<Fund name>  
c/o Maples Fund Services (Ireland) Limited  
Beaux Lane House  
Mercer Street Lower  
Dublin 2  
Ireland  
Fax: +353 (0)1 697 3390  
Tel: +353 (0)1 697 3219  
E-mail: investorservicesdublin@maplesfs.com

Dear Sirs:

**RE:** [name and address of Subscriber] (the "Subscriber")

1. We are a relevant third party as defined under the Criminal Justice (Money Laundering and Terrorist Financing) Acts 2010 and 2013 (together the "Act") and are supervised for compliance with the Third Money Laundering Directive 2005/60/EC.
2. We confirm that we have undertaken and completed customer due diligence measures in accordance with sections 33 and 35(1) of the Act.
3. We confirm that we are not aware that the Subscriber (and its beneficial owner(s), if applicable) have been found to be or have been suspected of activity that would presently constitute a money laundering and/or terrorist financing offence.
4. We confirm that we consent to the Administrator, the Fund and its money laundering reporting officer relying upon the identification and verification procedures which we have carried out in respect of the Subscriber (and its beneficial owner(s), if applicable) in accordance with section 40(4) of the Act .
5. We confirm that we will provide to you as soon as practicable after a request is made by you, any documents (whether or not in electronic form) or information relating to the Subscriber (and its beneficial owner(s), if applicable) that we have obtained in applying the measures referred to at paragraph number 2 above and in accordance with section 40(4) of the Act.
6. We confirm that we will retain the documents referred to at paragraph number 5 above for a minimum of five years following the repurchase by the Fund of the Subscriber's investment therein.
7. We confirm that we are aware that you relying upon us for customer due diligence purposes other than monitoring

Signed:

Name:

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## 7. 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 Data Protection Acts, 1998 and 2003 of Ireland. 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 Revenue, the Irish tax authority. 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 on FATCA or CRS please refer to the Irish Revenue or OECD websites at: <http://www.revenue.ie/en/business/aeoi/index.html> or the following link to the OECD CRS Information Portal at: <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

*If any of the information below about the 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.*

**Section 1, 2, 3 and 5 must be completed by all Account holders or Controlling Persons.**

**Section 4 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.**

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

**(Mandatory fields are marked with an \*)**

### **\*Section 1: Account Holder/Controlling Person Identification**

**\*Account Holder / Controlling Person Name:** \_\_\_\_\_

### **\*Current Residential Address:**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, Town, State, Province or County: \_\_\_\_\_

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

### **Mailing address (if different from above):**

Number: \_\_\_\_\_ Street: \_\_\_\_\_

City, Town, State, Province or County: \_\_\_\_\_

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

### **\*Place and Date Of Birth**

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

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

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

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

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

\_\_\_\_\_

**OR**

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

**\*Section 3: CRS Declaration of Tax Residency/Residencies (please confirm all Tax Residencies)**

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TINs")). For further guidance please refer to the OECD CRS Information Portal (<http://www.oecd.org/tax/automatic-exchange/>).

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

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

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

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

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

**Section 4 – Type of Controlling Person**

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

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

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the 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		

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Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary-equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

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

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

I acknowledge 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: <http://oecd.org/tax/automatic-exchange/> and on the Irish Revenue website - <http://www.revenue.ie/en/business/aeoi/>

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

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

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

\*Capacity (if Controlling Person): \_\_\_\_\_

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## 8. FATCA/CRS (ENTITY SELF-CERTIFICATION FORM FOR CORPORATIONS/PARTNERSHIPS/TRUSTS OR FOUNDATIONS)

### 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 Data Protection Acts, 1988 and 2003 of Ireland. 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 on FATCA or CRS please refer to the Irish Revenue or the OECD website at: <http://www.revenue.ie/en/business/aeoi/index.html> or the following link:

<http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

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

(Mandatory fields are marked with an \*)

**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".**

### \*Section 1: Account holder Identification

\*Account holder Name: \_\_\_\_\_ (the "Entity")

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: \_\_\_\_\_

### \*Section 2: FATCA Declaration:

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

a) The Entity is a **Specified U.S. Person** and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:

U.S. TIN: \_\_\_\_\_

Or

b) The Entity is **not a Specified U.S. Person** (Please also complete Sections 3, 4 and 5)

Or

c) The Entity is a **US person but not a Specified U.S. Person** (Please also complete Sections 4 and 5)

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Indicate exemption: \_\_\_\_\_

**\*Section 3: Entity's FATCA Classification (the information provided in this section is for FATCA, please note your FATCA classification may differ from your CRS classification in Section 5):**

### 3.1 Financial Institutions under FATCA:

If the Entity is a *Financial Institution*, please tick one of the below categories and provide the Entity's GIIN at 3.2 or indicate at 3.3 the reason why you are unable to provide a GIIN.

I.	Irish Financial Institution or a Partner Jurisdiction Financial Institution	<input type="checkbox"/>
II.	Registered Deemed Compliant Foreign Financial Institution	<input type="checkbox"/>
III.	Participating Foreign Financial Institution	<input type="checkbox"/>

### 3.2 Please provide the Entity's *Global Intermediary Identification number ("GIIN")*

□□□□□□.□□□□□□.□□.□□□□

### 3.3 If the Entity is a *Financial Institution* but unable to provide a *GIIN*, please tick one of the below reasons:

I.	<p>The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i>∞ Please provide the sponsor's name and sponsor's <i>GIIN</i> :</p> <p><b>Sponsor's Name:</b> _____</p> <p><b>Sponsor's <i>GIIN</i>:</b> □□□□□□.□□□□□□.□□.□□□□</p> <p><small>∞NOTE: this option is only available to Sponsored Investment Entities in Model 1 IGA jurisdictions. Sponsored Investment Entities that do not have U.S. reportable accounts are not required to register and obtain a GIIN with the IRS unless and until U.S. reportable accounts are identified.</small></p>	<input type="checkbox"/>
II.	<p><b>The Entity is an Exempt Beneficial Owner,</b></p> <p>Please tick and confirm the category of Exempt Beneficial Owner;</p> <p>I. <input type="checkbox"/> Government Entity</p> <p>II. <input type="checkbox"/> International Organisation</p> <p>III. <input type="checkbox"/> Foreign Central Bank</p> <p>IV. <input type="checkbox"/> Exempt Retirement Fund</p> <p>V. <input type="checkbox"/> Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</p>	<input type="checkbox"/>

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III.	<p><b>The Entity is a Certified Deemed Compliant Foreign Financial Institution</b> (including a deemed compliant Financial Institution under Annex II of the IGA Agreement)</p> <p>Indicate exemption: _____</p>	<input type="checkbox"/>
IV.	<p><b>The Entity is a Non-Participating Foreign Financial Institution</b></p>	<input type="checkbox"/>
V.	<p><b>The Entity is an Excepted Foreign Financial Institution</b></p> <p>Indicate exemption: _____</p>	<input type="checkbox"/>
VI.	<p><b>The Entity is a Trustee Documented Trust. Please provide your Trustee's name and GIIN</b></p> <p>Trustee's Name: _____</p> <p>Trustee's GIIN: □□□□□□.□□□□□□.□□.□□□□</p>	<input type="checkbox"/>

**3.4. Non-Financial Institutions (Non-Foreign Financial Entity/NFFE) under FATCA:**

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

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

**CERNO INVESTMENT FUNDS ICAV (the "ICAV") Application Form for CERNO UNCONSTRAINED FUND (the "Fund")**

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**\*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.

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

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

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

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

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

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

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

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

**5.1 Financial Institutions under CRS:**

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

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

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I.	<b>A Reporting Financial Institution resident in a participating CRS jurisdiction</b>	<input type="checkbox"/>
II.	<p><b>A Financial Institution Resident in a Non-Participating Jurisdiction.</b></p> <p><input type="checkbox"/> <b>An Investment Entity resident in a Non-Participating Jurisdiction and managed by another Financial Institution</b> (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity in <b>section 6 below</b> and complete a separate individual self-certification forms for each of your Controlling Persons“)</p> <p><input type="checkbox"/> <b>An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution</b></p> <p><input type="checkbox"/> <b>Other Financial Institution</b>, including a Depository Financial Institution, Custodial Institution or Specified Insurance Company</p>	<input type="checkbox"/>
III.	<p><b>Non-Reporting Financial Institution under CRS. Specify the type of Non-Reporting Financial Institution below:</b></p> <p><input type="checkbox"/> Governmental Entity</p> <p><input type="checkbox"/> International Organization</p> <p><input type="checkbox"/> Central Bank</p> <p><input type="checkbox"/> Broad Participation Retirement Fund</p> <p><input type="checkbox"/> Narrow Participation Retirement Fund</p> <p><input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank</p> <p><input type="checkbox"/> Exempt Collective Investment Vehicle</p> <p><input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts</p> <p><input type="checkbox"/> Qualified Credit Card Issuer</p> <p><input type="checkbox"/> Other Entity defined under the domestic law as low risk of being used to evade tax.</p> <p>Specify the type provided in the domestic law:</p> <p>_____</p> <p>_____</p>	<input type="checkbox"/>

**5.2 Non Financial Institutions (“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 or Passive NFE.

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

**Section 6: Controlling Persons**

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

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

For further information on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard. <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/#d.en.345314>

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

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

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

I.	
II.	
III.	

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

**6.2 Complete a separate Individual (Controlling Person's) Self-Certification for FATCA and CRS for each Controlling Person listed in Section 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 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):**

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**\*Print Name(s):**

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**\*Capacity in which declaration is made:**

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

# CERNO INVESTMENT FUNDS ICAV (the "ICAV") Application Form for CERNO UNCONSTRAINED FUND (the "Fund")

## 9. DECLARATION OF RESIDENCE OUTSIDE IRELAND (non-resident composite declaration)

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

### Declaration on own behalf

I/we\* declare that I am/we are\* applying for the shares on my own/our own behalf/on behalf of a company\* and that I am/we are/the company\* is entitled to the shares in respect of which this declaration is made and that

- I am/we are/the company is\* not currently resident or ordinarily resident in Ireland, and
- should I/we/the company\* become resident in Ireland I will/we will\* so inform you, in writing, accordingly.

\*Delete as appropriate

### Declaration as Intermediary

I/we\* declare that I am/we are\* applying for shares on behalf of persons:

- who will be beneficially entitled to the shares; and,
- who, to the best of my/our\* knowledge and belief, are neither resident nor ordinarily resident in Ireland.

I/we\* also declare that:

- unless I/we\* specifically notify you to the contrary at the time of application, all applications for shares made by me/us\* from the date of this application will be made on behalf of such persons; and,
- I/we\* will inform you in writing if I/we\* become aware that any person, on whose behalf I/we\* holds shares, becomes resident in Ireland.

\*Delete as appropriate

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

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

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

### Joint applicants:

Names \_\_\_\_\_ Signatures \_\_\_\_\_

### IMPORTANT NOTES

- 1 Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
- 2 To be valid, the application form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.
- 3 If the 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.
- 4 Irish Residents who are seeking to apply for Shares should contact the Administrator for an Application Form which does not include the above declaration. Exempt Investors who are entitled to payment without deduction of tax should also request the appropriate alternative declaration form from the Administrator.

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## 10. DECLARATION OF RESIDENCY IN IRELAND

**Resident Entities Composite Declaration  
Declaration referred to in Section 739D(6)  
Taxes Consolidation Act, 1997**

This declaration, if it is then still correct, shall apply in respect of any subsequent acquisition of Shares.

- I declare that the information contained in this declaration is true and correct
- I also declare that I am applying for the Shares on behalf of the applicant named below who is entitled to the Shares in respect of which this declaration is made and is a person referred to in Section 739D(6) of the Taxes Consolidation Act, 1997, being a person who is (please tick ✓ as appropriate)

a pension scheme;	
a company carrying on life business within the meaning of section 706 TCA 1997;	
an investment undertaking;	
an investment limited partnership;	
a special investment scheme;	
a unit trust to which section 731 (5)(a) TCA 1997 applies;	
a charity being a person referred to in section 739D(6)(f)(i) TCA1997;	
a qualifying management company;	
entitled to exemption from income tax and capital gains tax by virtue of section 784A(2) TCA, 1997* (see further requirement for Qualifying Fund Manager below);	
a PRSA Administrator;	
a credit union within the meaning of section 2 of the Credit Union Act 1997.	

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

- I also declare that at the time of making this declaration, the Shares in respect of which this declaration is made are held for charitable purposes only and
  - form part of the assets of a body of persons or trust treated by the Revenue Commissioners as a body or trust established for charitable purposes only, or
  - are, according to the rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Revenue Commissioners.
- I undertake that, in the event that the person referred to in paragraph (7) of Schedule 2B TCA 1997 ceases to be a person referred to in Section 739D(6)(f)(i) TCA, 1997, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

**Additional requirements where the declaration is completed by a qualifying fund manager / PRSA Administrator**

- I/we\* also declare that at the time this declaration is made, the Shares in respect of which this declaration is made
  - are assets of \* an approved retirement fund/an approved minimum retirement fund or a PRSA, and
  - are managed by the Declarant for the individual named below who is beneficially entitled to the Shares.
- I/we\* undertake that, if the Shares cease to be assets of \*the approved retirement fund/the approved minimum retirement fund or the PRSA, including a case where the Shares are transferred to another such fund or account, I/we\* will, by written notice, bring this fact to the attention of the investment undertaking accordingly.

**\*Delete as appropriate**

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## Additional requirements where the declaration is completed by an Intermediary

- I/we\* also declare that I am/we are\* applying for Shares on behalf of persons who
  - To the best of my/our\* knowledge and belief, have beneficial entitlement to each of the Shares in respect of which this declaration is made, and
  - Is a person referred to in section 739D(6) TCA, 1997.
  
- I/we\* further declare that
  - Unless I/we\* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us\* from the date of this application will be made on behalf of persons referred to in section 739D(6) TCA, 1997, and
  - I/we\* will inform you in writing if I/we\* become aware that any person ceases to be a person referred to in section 739D(6) TCA, 1997.

*\*Delete as appropriate*

Name of applicant: \_\_\_\_\_

Irish tax reference number of applicant: \_\_\_\_\_

Authorised signatory: \_\_\_\_\_ (Declarant)

Title: (Mr/Ms. etc) \_\_\_\_\_

Capacity in which declaration is made: \_\_\_\_\_

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

### Important Notes

1. This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration.
2. Tax reference number in relation to a person has the meaning assigned to it by Section 885 TCA, 1997 in relation to a "specified person" within the meaning of that section. In the case of a charity, quote the Charity Exemption Number (CHY) as issued by Revenue. In the case of a qualifying fund manager, quote the tax reference number of the beneficial owner of the Share.
3. In the case of, (i) an exempt pension scheme, the administrator must sign the declaration; (ii) a retirement annuity contract to which Section 784 or 785 applies, the person carrying on the business of granting annuities must sign the declaration; (iii) a trust scheme, the trustees must sign the declaration. In the case of a charity, the declaration must be signed by the trustees or other authorised officer of a body of persons or trust established for charitable purposes only within the meaning of Sections 207 and 208 TCA 1997. In the case of an approved retirement fund/an approved minimum retirement fund or a PRSA, it must be signed by a qualifying fund manager or PRSA administrator. In the case of an intermediary, the declaration must be signed by the intermediary. In the case of a company, the declaration must be signed by the company secretary or other authorised officer. In the case of a unit trust it must be signed by the trustees. In any other case it must be signed by an authorised officer of the entity concerned or a person who holds a power of attorney from the entity. A copy of the power of attorney should be furnished in support of this declaration.

**CERNO INVESTMENT FUNDS ICAV (the "ICAV") Application Form for CERNO UNCONSTRAINED  
FUND (the "Fund")**

**11. FOR IRISH RESIDENT INVESTORS WHO ARE NOT EXEMPT INVESTORS - RETURN OF  
VALUES (INVESTMENT UNDERTAKINGS) REGULATIONS 2013**

The Company must collect additional information in order to satisfy Return of Values (Investment Undertakings) Regulations 2013(S.I. 245 of 2013). Therefore any individual, company or any unincorporated body of persons which is Irish resident or ordinarily Irish resident and is not an Exempt Investor (as defined in the Prospectus) must provide the following additional information and documentation:

Tax Identification Number (TIN) / PPS Number and any one of the following additional documents are required to verify the TIN or PPS Number (either a copy or the original is sufficient): P60, P45, P21 Balancing Statement, Payslip (where employer is identified by name or tax number), Drug Payment Scheme Card, European Health Insurance Card, Tax Assessment, Tax Return Form, PAYE Notice of Tax Credits, Child Benefit Award Letter /Book, Pension Book, Social Services Card or Public Services Card. In addition, any printed documentation issued by the Revenue Commissioners or by the Department of Social Protection which contain your name, address and tax reference number will also be acceptable. In the case of joint account holders, the additional documentation is required for each applicant.

*Your personal information will be handled by the Administrator or it's duly appointed delegates as Data Processor for the Company in accordance with the Data Protection Acts 1988 to 2003. Your information provided herein will be processed for the purposes of complying with the Return of Values (Investment Undertakings) Regulations 2013 and this may include disclosure to the Irish Revenue Commissioners.*

**CERNO INVESTMENT FUNDS ICAV (the "ICAV") Application Form for CERNO UNCONSTRAINED FUND (the "Fund")**

**12. SIGNATURE AND DECLARATION**

By signing here, the Applicant is applying for Shares in the [●] Fund on the terms of the Prospectus and this Application Form.

I / We declare that the information contained in this Application Form and the attached documentation, if any, is true and accurate to the best of my / our knowledge and belief.

I / We agree that the representations set forth above are continuous and will be deemed to be repeated in connection with all further purchases of Shares. I / We further agree to advise the Fund promptly of any violations of the representations set forth herein.

I / We declare that I / we will promptly notify the Fund and the Administrator of any changes in the information or representations provided.

I / We declare that I am authorised to sign this Application Form on my/our own behalf or on behalf of the intermediary, agent or nominee (if applicable) and to make the representations and give the indemnities referred to herein.

In the case of Individual Applicants, simply sign the top line; in the case of Joint Applicants all applicants must sign.

Name of Authorised Signatory	Title	Signature	Date
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

**Reminder in regard to what needs to be completed and filled in:**

- **ALL** investors must complete **sections 1 to 6** and **section 12**
- **Individuals only** must complete **section 7**
- **Entities for Corporations/Partnerships/Trusts or Foundations** must complete **section 8**
- **Non-Irish residents only** must complete **section 9**
- **Irish residents only** must complete **section 10**
- **Irish residents who are not Exempt Irish Residents only** (as defined in the Prospectus) must complete **section 11**