

Epoch Investment Funds Plc Application Form

<p>Mailing Address C/o State Street Fund Services (Ireland) Limited Transfer Agency Department 78 Sir John Rogerson's Quay Dublin 2 Ireland Tel: + 353 1 242 5431 Fax: +353 1 438 9542 Email: EpochIS@statestreet.com Attention: Transfer Agency Department</p>	<p>Please tick here if this has already been sent by facsimile transmission. <input type="checkbox"/></p>
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Should you have any questions, please contact the Administrator, State Street Fund Services (Ireland) Limited, 78 Sir John Rogersons Quay, Dublin 2, Ireland. Telephone: + 353 1 242 5431 Facsimile: +353 1 438 9542 Email: EpochIS@statestreet.com

Should you have any questions pertaining to the Company's Promoter and Investment Manager, please contact Epoch Investment Partners, Inc. at the following email address: ClientServicesGroup@eipny.com.

The information contained in this communication is intended to supplement information contained in the current Prospectus and must be read in conjunction therewith. It is not an offer to buy or sell, or the solicitation of any offer to buy or sell, Shares which offer can only be made by the Prospectus.

Unless the context otherwise requires and except as varied or otherwise specified in this Application Form, words and expressions contained in this Application Form shall bear the same meaning as in the Prospectus and applicable Supplemental Prospectus.

Instructions

For initial subscriptions for Shares you must complete the Application Form and post it to the address above. Completed Application Forms may also be sent by fax 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 telephone, stating your registration details and the amount to be invested. If you wish to instruct deals and obtain other information by telephone, please complete Section X. Please note that telephone calls will be recorded. Telephone privileges are not extended to joint retail accounts.

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 Bank Details			
	US Dollars	GBP Sterling	Euro
IBAN		GB03 BOFA 1650 5022 5010 10	GB02 BOFA 1650 5022 5010 28
SWIFT Code	BOFAUS3N	BOFAGB22	BOFAGB22
Beneficiary Bank	Bank of America N.A., New York	Bank of America N.A.,	Bank of America N.A.
Account Number	6550-4-62959	22501010	22501028
Beneficiary Name	Epoch Investment Funds PLC	Epoch Investment Funds PLC	Epoch Investment Funds PLC
Reference	Name of Fund - Applicant	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.

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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 Shares. The Administrator may, at its discretion, accept payment in other currencies, but such payments will be converted into the currency of the relevant Share class at the then prevailing exchange rate and any conversion expenses shall be borne by the Shareholder. This may result in a delay in processing the application.

Details of Investment:

The Applicant, having received and read a copy of the Prospectus of Epoch Investment Funds Plc (the "Company") hereby applies to invest in the Company, as indicated in the table below:

Fund Name	Share Class	Currency	ISIN	Number of Shares	Value of Subscription
Epoch Global Choice Fund	Class A Institutional USD Accumulating Unhedged	USD	IE00B8DP6542		
Epoch Global Choice Fund	Class B Institutional USD Accumulating Unhedged	USD	IE00B965D461		
Epoch Global Choice Fund	Class A Institutional EURO Accumulating Unhedged	EUR	IE00BDF11V66		
Epoch Global Choice Fund	Class B Institutional EURO Accumulating Unhedged	EUR	IE00BDF11W73		
Epoch Global Equity Shareholder Yield Fund	Class A Institutional USD Accumulating Unhedged	USD	IE00B9GBLG23		
Epoch Global Equity Shareholder Yield Fund	Class B Institutional USD Accumulating Unhedged	USD	IE00B9G90W55		
Epoch Global Equity Shareholder Yield Fund	Class A Institutional GBP Accumulating Unhedged	GBP	IE00BP84ZB49		
Epoch Global Equity Shareholder Yield Fund	Class B Institutional GBP Accumulating Unhedged	GBP	IE00BP84ZC55		
Epoch Global Equity Shareholder Yield Fund	Class A Income Institutional GBP Unhedged	GBP	IE00BYWWVN19		
Epoch Global Equity Shareholder Yield Fund	Class B Income Institutional GBP Unhedged	GBP	IE00BYWWVP33		
Epoch Global Equity Shareholder Yield	Class A Institutional	EUR	IE00BDF11S38		

Fund	EURO Accumulating Unhedged				
Epoch Global Equity Shareholder Yield Fund	Class B Institutional EURO Accumulating Unhedged	EUR	IE00BDF11T45		

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Account Registration Details						
Registered Name						
Account Designation (if any)						
Shareholder Type ¹						
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)						
Registered Address PO or C/O will not be accepted						
Mailing Address (if different)						
Contact Name						
Contact Details	Telephone		Facsimile		Email	

Joint Applicant(s)

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

First 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)						
Registered Address PO or C/O will not be accepted						
Contact Name						
Contact Details	Telephone		Facsimile		Email	

Second additional applicant details						
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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)						
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)						
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 (where applicable)	
Registered Name	
Address	
Entity Type ¹	
Date of Birth (if individual)	

Beneficiary Owner 2 (where applicable)	
Registered Name	
Address	

Entity Type ¹	
Date of Birth	

Beneficiary Owner 3 (where applicable)	
Registered Name	
Address	
Entity Type ¹	
Date of Birth (if individual)	

Beneficiary Owner 4 (where applicable)	
Registered Name	
Address	
Entity Type ¹	
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

¹: 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 and Distribution 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)	MT202 <input type="checkbox"/> / MT103 <input type="checkbox"/>
Currency	
Reference	

Dividend Option (please tick)**Please Tick**

Reinvest Option	automatic purchase of additional shares of the same class equivalent to monthly dividends	
Cash option	pay all dividends to the bank account listed above	

Should this section not be completed, dividends will be automatically reinvested in additional shares

EU Savings Directive

Council Directive 2003/48/EC of 3 June 2003 (the "EU Savings Directive"), which deals with the taxation of savings income in the form of interest payments, seeks to ensure that an individual who is resident in a member state of the European Union (an "EU Member State") and who receives savings income from another EU Member State¹, is taxed in the EU Member State in which he/she is resident for tax purposes. In this regard the Fund is obliged to establish the identity and residence of such individuals.

For completion by Applicants who are tax resident outside the EU Member States

The Applicant confirms by ticking the box to the left that the Applicant is not resident in an EU Member State and has not verified its identity for the purposes of the Fund money laundering verification requirements by use of an EU passport/official identity;

¹ Also applicable to residents of USA, Switzerland, Andorra, Liechtenstein, Monaco, San Marino, Jersey, Guernsey, Isle of Man, Anguilla, Montserrat, British Virgin Islands, Turks and Caicos Islands, Cayman Islands, Netherlands Antilles, and Aruba. Accordingly any reference to EU Member State should be deemed to include these additional countries.

Applicants who are tax resident in the EU Member States should complete either Section (1) or Section (2) below:

Section 1: This Section 1 is to be completed by an Applicant resident in an EU Member State who is not a natural person (i.e., not an individual, unincorporated body, unincorporated partnership, or any of the foregoing acting as trustee of a trust):

- a. Is Applicant a legal person, e.g., an incorporated entity? YES or NO (strike out as applicable)
- b. Are Applicant's profits taxed under general arrangements for business taxation? YES or NO (strike out as applicable)
- c. (i) Is Applicant a UCITS or (ii) has Applicant been issued a certificate by Applicant's EU Member State allowing Applicant to be treated as a UCITS for the purposes of the EU Savings Directive? YES or NO (strike out as applicable)

Section 2: This Section 2 is to be completed by natural person Applicants (i.e., an individual, an unincorporated body, an unincorporated partnership, or any of the foregoing acting as a trustee of a trust) residing in an EU Member State or who, in completing the Trust's money laundering verification requirements, have verified his/her identity by use of an EU Member State passport/official identity:

- A. Specify the EU Member State in which Applicant is tax resident: _____
Please insert the Tax Identification Number ("TIN") issued to Applicant by that EU Member State: _____
- B. Is Applicant's EU passport or official identity issued by the same EU Member State that appears in Applicant's address in section 1. YES or NO (strike out as applicable)
- C. Applicant's date, place, and country of birth: _____

If Applicant answered Yes to Section 1(c) (ii) above, Applicant must provide a certified copy of the certificate.

If Applicant answered NO to Section 2(b) above, then Applicant must provide a "certificate of residence for tax" issued by Applicant's local taxation authority, otherwise Applicant's EU residency will be decided and reported upon the basis of information contained in Applicant's passport/official identity card and/or other documentation provided for the purposes of satisfying the Company's money laundering verification requirements.

Data Protection

I/We hereby acknowledge that my/our personal information will be handled by the Administrator (as data processor on behalf of the Company) in accordance with the Irish Data Protection Acts 1988 to 2003, as amended from time to time. I/We also acknowledge that this information will be processed by the Administrator for the purposes of carrying out the services of administrator, registrar and transfer agent of the Company and to comply with legal obligations including legal obligations under company law and anti-money laundering legislation. I/We acknowledge that the Administrator or Company will disclose my/our information to third parties where necessary or for legitimate business interests. This may include disclosure to third parties such as the auditors, the Irish Revenue Authorities pursuant to the EU Savings Directive and the Central Bank of Ireland or agents of the Administrator who process the data for anti-money laundering purposes or for compliance with foreign regulatory requirements. I/We hereby consent to the processing of my/our information, which may include (1) the recording of telephone calls with the Administrator for the purpose of confirming data, (2) the disclosure of my/our information as outlined above to the Company or its delegate including the Investment Manager (3) the disclosure of my/our information where necessary, or in the Company's or the Administrator's legitimate interests, to the MLRO and/or any company in the Administrator's and/or the Company and/or the Investment Manager's group of companies, or (4) the disclosure of my/our information to agents of the Administrator, including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in Ireland. I/we acknowledge my/our right of access to and the right to amend and rectify my/our personal data, as provided herein. For the avoidance of doubt the Company shall be considered a data controller in accordance with the Irish Data Protection Acts and the Administrator shall be considered a Data Processor.

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'affaires or high-ranking officer in the armed forces

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 of PEP	
Office of PEP		Relationship of Applicant or Applicant's Beneficial Owner to PEP	

Source of Wealth of the PEP (e.g. Income from employment, Income from company business, inheritance, etc)

SECTION B: PLEASE TICK BOX BELOW IF THE PEP RULES DO NOT APPLY WITH REFERENCE TO THE DEFINITIONS ABOVE:

I/we confirm that the application is NOT being made by a PEP / immediate family member of a PEP / close associate of a PEP

AND

the applicant does not have a beneficial owner who is a PEP / immediate family member of a PEP / close associate of a PEP

AND

the application is NOT being made for the benefit of a PEP / immediate family member of a PEP / close associate of a PEP

AND

it is NOT intended to transfer the shares to a PEP / immediate family member of a PEP / close associate of a PEP

US Person Confirmation

Please complete EITHER SECTION A OR SECTION B as applicable

SECTION A: PLEASE TICK BOX AND DELETE AS APPLICABLE IF THE STATEMENT BELOW IS CORRECT

I/We confirm that I am/we are a US Person (as defined in the Prospectus) and am/are acquiring Shares in the Fund on behalf of, or for the benefit of, a US Person, OR I/we intend to transfer any Shares which I/we may purchase to any 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

I/We confirm that I am/we are not a US Person (as defined in the Prospectus) and am/are not acquiring Shares in the Fund on behalf of, or for the benefit of, a US Person, nor do I/we intend to transfer any Shares which I/we may purchase to any US Person

Personal Portfolio Investment Undertaking (PPIU)

*I/We confirm that *I am/we are an Irish Resident or Irish Ordinary Resident who is a director or has a relationship with a director of the fund.

Please enter name(s) of PPIU _____

[*Delete as appropriate](#)

UCITS IV

By signing this Application Form, I/we acknowledge that *I/we have viewed, reviewed and understood the Key Investor Information Document (KIID) applicable to the relevant Share class(es) to which this Application Form relates in good time and 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 and the applicable Supplemental Prospectus hereby confirm that this application is based solely on the Prospectus for the Company and Supplemental Prospectus for the Shares hereby subscribed each as current at the date of this application and the material contracts therein referred together (where applicable) with the most recent annual report and accounts of the Company and (if issued after such report and accounts) its most recent unaudited semi-annual report.

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 Administrator, the Investment 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 Administrator, the Investment 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.

The Company and Administrator are each hereby authorised and instructed to accept and execute any instructions in respect of the Shares to which this application relates given by me/us in written form, by facsimile or by electronic means with prior agreement from the Administrator or by such other means as the Company may subscribe from time to time. If the instructions are given by me/us by facsimile, I/we undertake to confirm them in writing. I/We hereby agree to indemnify the Company and Administrator and agree to keep it indemnified against any loss of any nature whatsoever arising to any of them as a result of it acting upon facsimile or electronic instructions or any such other means as the Company may prescribe. The Administrator 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 Administrator 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 am/We are fully empowered and have authority to make this investment whether the investment is on my/our own behalf or on the behalf of another person or institution. I/We have such knowledge and experience in financial and business matters that I/we am/are capable of evaluating the merits and risks of my/our investment in the Company and are able to bear such risks, and has obtained, in my/our judgment, sufficient information from the Company to evaluate the merits and risks of such investment. I/We have evaluated the risks of investing in the Company, understand there are substantial risks of loss incidental to the purchase of Shares and have determined that the Shares are a suitable investment for me/us.

I/we acknowledge that the Company operates a number of cash accounts in different currencies in its name into which (i) subscription monies received from investors who have subscribed for Shares are deposited and held until Shares are issued as of the relevant Dealing Day; and (ii) redemption monies due to investors who have redeemed Shares are deposited and held until paid to the relevant investors; and (iii) dividend payments owing to Shareholders are deposited and held until paid to such Shareholders (hereinafter referred to as "Umbrella Cash Account(s)"). We acknowledge that all subscriptions, redemptions and dividends payable to or from a Fund are channeled and managed through the Umbrella Cash Accounts.

I/We acknowledge that my / our subscription monies/ redemption monies / dividend monies will be paid into the Umbrella Cash Account, that such monies will be treated as an asset of the relevant Fund and I/we will not benefit from the application of any investor money protection rules (i.e. the monies will not be held on trust as investor monies for me/us) and that I/we will be an unsecured creditor of the relevant Fund (i) with respect to the amount subscribed for Shares and held in the Umbrella Cash Account until such Shares are issued to me/us as of the relevant Dealing Day or (ii) with respect to the redemption/dividend amount to be paid and held in the Umbrella Cash Account until such amount is paid to me/us (whichever is applicable).

I/We acknowledge that in accordance with applicable anti money-laundering and terrorist financing requirements (the "AML Requirements), redemption monies or dividend payments shall not be paid on un-verified accounts. In the event that I/we fail to submit the necessary documentation requested by the Company or its delegate as required under the AML Requirements, redemption monies or dividend monies will be held in an Umbrella Cash Account and shall remain an asset of the relevant Fund and I/we will not benefit from the application of any investor money protection rules (i.e. the redemption monies/dividend monies will not be held on trust for me/us). In such circumstances, I/we acknowledge that I/we will be unsecured creditors of the relevant Fund in respect of such redemption monies or dividend payments until such time as the relevant documentation required by the Company has been received to its satisfaction and the redemption monies/dividend payments have been paid to me/us.

I/We acknowledge that the following risks arise in relation to the operation of the Umbrella Cash Account:-

- (i) in the event that subscription monies received and held in an Umbrella Cash Account are lost (to include in the event of the insolvency of the bank with which such monies are held) prior to the issue of Shares to the relevant investor as of the relevant Dealing Day, the Company on behalf of the Fund may be obliged to make good any losses suffered by the investor (in its capacity as a general creditor of the Fund), in which case such loss will need to be discharged out of the assets of the relevant Fund and therefore will represent a diminution in the net asset value per share for existing Shareholders of the relevant Fund;
- (ii) in the event that redemption or dividend monies held in an Umbrella Cash Account are lost (to include in the event of the insolvency of the bank with which such monies are held) prior to payment to the relevant investor/ Shareholder, the Company on behalf of the Fund may be obliged to make good any losses suffered by the investor/ Shareholder (in its capacity as a general creditor of the Fund), in which case such loss will need to be discharged out of the assets of the relevant Fund and therefore will represent a diminution in the net asset value per Share for existing Shareholders of the relevant Fund;
- (iii) in the event of an insolvency of the relevant Fund or the Company, there is no guarantee that the Fund or the Company will have sufficient funds to pay unsecured creditors in full. Investors who have forwarded subscription monies in advance of a dealing day and which are held in the Umbrella Cash Account and investors /Shareholders due redemption / dividend monies which are held in the Umbrella Cash Account will rank equally with all other unsecured creditors of the relevant Fund and will be entitled to a pro-rata share of monies which are made available to all unsecured creditors by the insolvency practitioner. Therefore, in such circumstances, the investor subscribing for Shares may not recover all monies originally paid into the Umbrella Cash Account in relation to the application for Shares and the redeeming investor entitled to redemption monies and the Shareholder entitled to a dividend payment may not recover all monies originally paid into the Umbrella Cash Account for onward transmission to that investor/Shareholder;
- (iv) in addition, investors should note that in the event of the insolvency of another Fund of the Company, recovery of any amounts to which a relevant Fund is entitled, but which may have been used by such other insolvent Fund as a result of the operation of the Umbrella Cash Account(s) will be subject to the principles of Irish trust law and the terms of the operational procedures for the Umbrella Cash Accounts. There may be delays in effecting and/or disputes as to the recovery of such amounts, and the insolvent Fund may have insufficient funds to repay the amounts due to the relevant Fund.

I/We agree to provide these representations to the Company, its Directors and the Administrator at such times as either of them may request and to provide on request such certifications, documents or other evidence as the Company, its Directors and/or the Administrator 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 Administrator immediately, if any representation or warranty are no longer accurate and to abide by any directions from the Company or the Administrator arising as a result.

I/we represent and warrant that I/we am/are not a U.S. Person (as described in the Prospectus).

I/we am/are fully informed as to the legal and tax requirements within my/our own country (or countries) regarding a purchase of the Shares.

I/we: (i) covenant that I/we will not resell, reoffer or transfer any Shares or any interest therein, except with the consent of the

Company, to a U.S. Person or for the account of a U.S. Person; (ii) acknowledge that reoffers, resales or any transfer of the Shares may be made only in compliance with applicable securities laws and only with the prior authorization of the Company; and (iii) understand that a transfer of Shares may only be effected on the books of the Company and acknowledge that the Shares shall be transferable only to investors who are eligible investors as described in the Prospectus. I/we understand and acknowledge that the Company may compulsorily redeem all or any portion of my/our Shares in accordance with the Prospectus.

I/We have not and shall not reproduce, duplicate or deliver the Prospectus, the applicable Supplemental Prospectus, the Memorandum and Articles of Association or this application form to any other person, except professional advisers to me/us or as authorized by the Company. Notwithstanding anything to the contrary herein or anything in the Memorandum and Articles of Association to the contrary, I/we (and each of my/our employees, representatives or other agents) may disclose to any and all persons, without limitation of any kind, the tax treatment and tax structure of: (i) the Company; and (ii) any of its transactions, and all materials of any kind (including, without limitation, opinions or other tax analyses) that are provided to me/us relating to such tax treatment and tax structure, it being understood that "tax treatment" and "tax structure" do not include the name or the identifying information of (i) the Company or (ii) the parties to a transaction.

I/We confirm that I/we have the right and authority to request redemption of Shares and confirm that I/we will comply with the redemption procedures set out in the Prospectus. All redemption or repurchase instructions must be given in writing, quoting the relevant account number and be accompanied by the relevant Share certificate, duly endorsed, if one has been issued.

In the event that Shares are allotted / issued notwithstanding that cleared funds have not been received within the usual time limits by the Company as set out in the Prospectus, I/we acknowledge that the Company may cancel the allotment / issue of my / our Shares and I/we will be liable to pay to the Company interest at such rate as may be determined by the Directors from time to time and/or other losses, charges or expenses suffered or incurred by the Company, the Depository or their delegates as a result of late payment or non-payment by me/us of subscription monies.

I/ We agree that the issue and allotment to me/us of Shares is subject to the provisions of the Prospectus, that subscription for Shares will be governed and construed in accordance with Irish law and I/we confirm that by subscribing for Shares, I/We are not relying on any information or representation other than such as may be contained in the Prospectus and the relevant Supplemental Prospectus.

I/We hereby agree to indemnify and keep indemnified the Company and the Administrator against any loss arising to it or to them as a result of any breach of any representation, warranty, covenant or confirmation by me/us in this application form or from my/our material failure to disclose any relevant details or provide it/them with all information requested.

In the case of delay or failure to provide satisfactory information, the Company and the Administrator may take such action (including declining to accept an application) as they think fit.

I/We agree to notify the Administrator immediately if I/we become aware that any of these confirmations are no longer accurate and complete in all respects and agree immediately either to sell or to tender to the Administrator for redemption a sufficient number of Shares to allow the confirmation to be made.

I/We understand that the Shares have not been approved or disapproved by any securities regulatory authority in any jurisdiction including without limitation any securities regulatory authority of any State of the United States or by the Securities and Exchange Commission, nor has any such authority or commission passed on the accuracy or adequacy of the Prospectus.

I/ We acknowledge that subscribing for Shares in the Epoch Global Equity Shareholder Yield Fund will have the effect of all/part of fees and expenses being charged to the capital at a Fund or Share Class level. This will have the effect of lowering the capital value of your investment.

(In respect of joint applicants 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 or survivors of us or the executor or its equivalent of such survivor or survivors.

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

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/Shares.

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

A - Declaration on Own Behalf

- i. 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 an Irish Resident or Irish Ordinary Resident, and should I/we/the company* become an Irish Resident, I/we will so inform you, in writing, accordingly.

*Delete as appropriate

B - Declaration as Intermediary

- i. 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 an Irish Resident or Irish Ordinary Resident, and
- ii. 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* hold Shares, becomes an Irish Resident.

*Delete as appropriate

AUTHORISATION

I/We agree to be bound by the Declarations, Representations, Consents and Indemnities set out in this Application Form

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 Administrator immediately.

Customer Information Notice – Common Reporting Standard

The Company intends to take such steps as may be required to satisfy any obligations imposed by (i) the Standard for Automatic Exchange of Financial Account Information in Tax Matters (“**the Standard**”) and, specifically, the Common Reporting Standard (“**CRS**”) therein or (ii) any provisions imposed under Irish law arising from the Standard or any international law implementing the Standard (to include the Multilateral Competent Authority Agreement on Automatic Exchange of Financial Account Information or the EU Council Directive 2011/16/EU (as amended by Council Directive 2014/107/EU)) so as to ensure compliance or deemed compliance (as the case may be) with the Standard and the CRS therein from 1 January 2016.

The Company is obliged under Section 891F of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to that section to collect certain information about each Applicant’s tax arrangements.

Please note that in certain circumstances the Company may be legally obliged to share this information and other financial information with respect to an Applicant’s interests in the Company with the Irish Revenue Commissioners. In turn, and to the extent the account has been identified as a Reportable Account, the Irish Revenue Commissioners will exchange this information with the country of residence of the Reportable Person(s) in respect of that Reportable Account.

In particular, the following information will be reported by the Company to the Irish Revenue Commissioners in respect of each Reportable Account maintained by the Company;

- The name, address, jurisdiction of residence, tax identification number and date and place of birth, in the case of an individual, of each Reportable Person that is an Account Holder of the account and, in the case of any Entity that is an Account Holder and that, after application of the due diligence procedures consistent with CRS is identified as having one or more Controlling Persons that is a Reportable Person, the name, address, jurisdiction of residence and tax identification number of the Entity and the name, address, jurisdiction of residence, TIN and date and place of birth of each such Reportable Person.
- The account number (or functional equivalent in the absence of an account number);
- The account balance or value as of the end of the relevant calendar year or other appropriate reporting period or, if the account was closed during such year or period, the closure of the account;
- The total gross amount paid or credited to the Account Holder with respect to the account during the calendar year or other appropriate reporting period with respect to which the Reporting Financial Institution is the obligor or debtor, including the aggregate amount of any redemption payments made to the Account Holder during the calendar year or other appropriate reporting period.

Please note that in certain limited circumstances it may not be necessary to report the tax identification number and date of birth of a Reportable Person.

In addition to the above, the Irish Revenue Commissioners and Irish Data Protection Commissioner have confirmed that Irish Financial Institutions (such as the Company) may adopt the “wider approach” for CRS. This allows the Company to collect data relating to the country of residence and the tax identification number from all non-Irish resident Applicants.

The Company can send this data to the Irish Revenue Commissioners who will determine whether the country of origin is a Participating Jurisdiction for CRS purposes and, if so, exchange data with them. The Irish Revenue Commissioners will delete any data for non-Participating Jurisdictions.

The Irish Revenue Commissioners and the Irish Data Protection Commissioner have confirmed that this wider approach can be undertaken for a set 2-3 year period pending the resolution of the final CRS list of Participating Jurisdictions.

Applicants can obtain more information on the Company’s tax reporting obligations on the website of the Irish Revenue Commissioners (which is available at <http://www.revenue.ie/en/business/aeoi/index.html>) or the following link in the case of CRS only:

<http://www.oecd.org/tax/automatic-exchange/>.

All capitalised terms above and below, unless otherwise defined above, shall have the same meaning as they have in the Standard.

Foreign Account Tax Compliance Act (“FATCA”) and Common Reporting Standards (“CRS”

I/We acknowledge that the Company intends to take such steps as may be required to satisfy any obligations imposed by either (i) the FATCA regulations or (ii) any provisions imposed under Irish law arising from the inter-governmental agreement between the Government of the United States of America and the Government of Ireland (“IGA”) so as to ensure compliance or deemed

compliance (as the case may be) with the FATCA regulations or the IGA from 1 July 2014.

Furthermore, I/we hereby acknowledge that the Company intends to also take such steps as may be required to satisfy any obligations imposed by (i) the Standard for Automatic Exchange of Financial Account Information in Tax Matters (“the Standard”) and, specifically, the Common Reporting Standard (“CRS”) therein or (ii) any provisions imposed under Irish law arising from the Standard or any international law implementing the Standard (to include the Multilateral Competent Authority Agreement on Automatic Exchange of Financial Account Information or the EU Council Directive 2011/16/EU (as amended by Council Directive 2014/107/EU)) so as to ensure compliance or deemed compliance (as the case may be) with the Standard and the CRS therein from 1 January 2016.

In order for the Company to comply with the above FATCA and CRS obligations, I/we agree to provide to the Company, the Investment Manager and the Administrator the necessary declarations, confirmations and/or classifications at such times as each of them may request and furthermore provide any supporting certificates or documents as each of them may reasonably require in connection with this investment by reason of FATCA or CRS, as described above, or otherwise. Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Company, the Investment Manager and the Administrator immediately of any such change and further agree to immediately take such action as the Company, the Investment Manager and the Administrator may direct, including where appropriate, redemption of my/our Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Company, the Investment Manager and the Administrator. If relevant, I/we agree to notify the Administrator of any change to my/our tax residency status. I/we hereby also agree to indemnify and keep indemnified the Company, the Investment Manager and the Administrator against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly as a result of a failure to meet our obligations pursuant to this section or failure to provide such information which has been requested by the Company, Investment Manager or Administrator and has not been provided by me/us, and from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the Company, Investment Manager or Administrator. I/We further acknowledge that a failure to comply with the foregoing obligations or failure to provide the necessary information required may result in the compulsory redemption of our entire holding in the Company, and that the Company are authorized to hold back from redemption proceeds or other distributions to me/us such amount as is sufficient after the deduction of any redemption charges to discharge any such liability and I/we shall indemnify and keep indemnified the Company, the Investment Manager, the Administrator and the Custodian against any loss suffered by them or other Shareholders in the Company in connection with any obligation or liability to so deduct, withhold or account.

I/We confirm that we have accurately and correctly completed the relevant self-certification form included below entitled “Entity Self-Certification for FATCA and CRS”. I/We further confirm that if any information included in the self-certification form subsequently becomes inaccurate or incorrect we will notify the Company, the Investment Manager and the Administrator immediately of any such change and agree to immediately take such action as the Company, the Investment Manager and/or the Administrator may direct, including where appropriate, redemption of our Shares.

In relation to FATCA and CRS, please also refer to and complete the relevant self-certification form in **Appendix 1** and **Appendix 2** hereto

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, an English translation may 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 Verification² - ONE official photographic document (Certified³)
2. Address Verification⁴ - TWO different address verification documents (Original or Certified)

Documentation which may be required for Designated Bodies in certain Countries⁵

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
5. Latest audited Financial Statements (Certified)
6. Nature and purpose of the entity
7. List of Directors to include full name, dates of birth, occupation, residential and business addresses
8. Authorised Mandate or Board Resolution to establish the business relationship
9. Original Authorised Signatory List
10. ONE Personal Verification and TWO Address Verification documents for at least TWO Directors (original or certified)
11. One Personal Verification and TWO Address Verification documents for ALL⁶ persons authorised to operate the account (original or certified)
12. Names and addresses of shareholders holding 10% or more of the issued share capital, and in the case of individual shareholders, names, residential addresses, occupations and dates of birth. Where a body corporate holds 25% or more of the issued share capital, names, residential addresses, occupations and dates of birth of the ultimate beneficial owners of that body corporate should be obtained.

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

Documentation for UK/Irish Pension Schemes (Additional documentation will be required for non Irish/UK schemes)

1. Confirmation of name and address
2. Constitutional / Formation Document (e.g.: Trust Deed)

AML checks on parent/investment manager of pension fund (who will be entered onto the register)

3. Copy of Revenue Approval
4. CTC Evidence that the person representing the Pension Scheme is empowered to act
5. Original Authorised signatory list

² 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.

³ 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.

⁴ 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.

⁵ Australia, Austria, Belgium, Canada, Denmark, Finland, France, Germany, Guernsey, Hong Kong, Iceland, Ireland, Italy, Jersey, Luxembourg, Isle of Man, Netherlands, Norway, Portugal, Singapore, Spain, Sweden, Switzerland, United Kingdom, United States (please note this list is subject to change).

⁶ In the case of credit institutions and financial institutions, which are regulated in their country of establishment, it is not necessary to verify the identity of those individuals who are entitled to issue instructions on behalf of the institution.

Documentation which may 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 required for a Trust/Foundation/Charity

1. Confirmation of name, registered & principal business address
2. Constitutional / Formation document (e.g.: Trust Deed or equivalent)
3. Nature and purpose
4. 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)
5. ONE Personal Verification and TWO Address Verification documents for any settler (where appropriate)
6. ONE Personal Verification and TWO Address Verification documents for all beneficiaries who own at least 25% of the capital
7. 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, Canada, Denmark, Finland, France, Germany, Guernsey, Hong Kong, Iceland, Ireland, Italy, Jersey, Luxembourg, Isle of Man, Netherlands, Norway, Portugal, Singapore, Spain, Sweden, Switzerland, United Kingdom, United States (please note this list is subject to change).

DESCRIPTION OF INVESTOR	DESIGNATED BODY INVESTING AS AN INTERMEDIARY <input type="checkbox"/> NOMINEE COMPANY <input type="checkbox"/>
--------------------------------	---

RELATIONSHIP OF CONFIRMATION PROVIDER (REGULATED ENTITY) TO INVESTOR	INVESTOR <input type="checkbox"/> PARENT OF INVESTOR <input type="checkbox"/>
---	--

Name of Regulated Entity _____

Name of Regulator _____

Address of Regulated Entity _____

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

1. We / the investor* 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 we / the investor* 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 our / the investor’s* 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 our / the investor's 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, subject to applicable rules and regulations.
5. We / the investor* will retain these documents and information for a period of at least 5 years after the relationship with an underlying investor has ended.
6. We / the investor* 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

* delete as applicable

APPENDIX 1

Individual (Controlling Person's) Self-Certification for FATCA and CRS

Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Fund with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

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

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

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

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

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

*(Mandatory fields are marked with an *)*

Section 1: Investor Identification

Investor Name*: _____

Current Residential Address*:

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Place Of Birth*

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

Date of Birth*: _____

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

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

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

OR

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

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

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

Country of Tax Residency	Tax ID Number

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

Section 4 – Type of Controlling Person

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

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

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

Section 5: Declaration and Undertakings:

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

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

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

Authorised Signature*: _____

Print Name*: _____

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

Capacity*: _____

APPENDIX 2
Entity Self-Certification for FATCA and CRS

Instructions for completion

Under Irish law, we are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Fund with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

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

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

*(Mandatory fields are marked with an *)*

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

Section 1: Investor Identification

Investor Name*: _____ (the "Entity")

Country of Incorporation or Organisation: _____

Current Registered Address*:

Number: _____ Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, town, State, Province or County: _____

Postal/ZIP Code: _____ Country: _____

Section 2: FATCA Declaration Specified U.S. Person:

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

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

U.S. TIN: _____

Or

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

Or

c) The Entity is a US person but **not** a *Specified U.S. Person* (please also complete Sections 3, 4 and 5)

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

3.1 Financial Institutions under FATCA:

If the Entity is a *Financial Institution*, please tick one of the below categories and provide the Entity's GIIN at 3.2

I.	<i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i>	
II.	<i>Registered Deemed Compliant Foreign Financial Institution</i>	
III.	<i>Participating Foreign Financial Institution</i>	

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

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

I.	The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i> Please provide the sponsor's name and sponsor's <i>GIIN</i> : Sponsor's Name: _____ Sponsor's <i>GIIN</i> : _____	
II.	<i>Exempt Beneficial Owner</i>	
III.	<i>Certified Deemed Compliant Foreign Financial Institution (including a deemed compliant Financial Institution under Annex II of the Agreement)</i>	
IV.	<i>Non-Participating Foreign Financial Institution</i>	
V.	<i>Excepted Foreign Financial Institution</i>	

3.4 Non-Financial Institutions under FATCA:

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

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

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

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

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

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

Country of Tax Residency	Tax ID Number

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

5.1 Financial Institutions under CRS:

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

I.	<i>Financial Institution under CRS(other than (II) below)</i>	
II.	<i>An Investment Entity located 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 and complete a separate individual self-certification forms for each of your Controlling Persons **)</i>	

5.2 Non Financial Institutions under CRS:

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

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

***Controlling Person’s:**

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

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

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

Section 6: Declarations and Undertakings

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

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

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

Authorised Signature(s)*:

Print Name(s)*:

Capacity in which declaration is made*:

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