

Corporates: Unit Trust/OEIC Application Form

For use by all incorporated and unincorporated entities, including corporate trusts, charities, private companies, partnerships, pension schemes, clubs and societies.

Please complete this form in **BLOCK CAPITALS** and return to: IFSL, PO Box 13586, Chelmsford, CM99 2GS, or to your financial adviser.

Section A - Holder and Contact Details This section is mandatory

Entity details

Legal entity name

Registered address

Postcode

Country

Country of establishment

Registration Body

Registration number

Date of registration

For charitable trusts and pension schemes that do not have a registered charity number, please provide the HM Revenue & Customs reference number on the line above.

Type of entity (structure)

e.g., listed public company, private company, charity, nominee, corporate trust, pension scheme, club or society.

Type of industry

e.g., financial services, professional services, energy and utilities, manufacturing, construction, technology, healthcare.

Source of funds

Will the investment be funded by the entity's capital or on behalf of the entity's underlying client(s)?

☐ ENTITY'S CAPITAL

☐ ENTITY'S UNDERLYING CLIENT(S)

Please state how the investment will be funded

e.g. from dividends, company profits, inheritance, sale of property.

Section A Continued

Contact details

Correspondence address

Postcode

Country

Primary contact name

Position

Phone

Email

Secondary contact name

Position

Phone

Email

Section B - Financial Adviser's Details To be completed by your financial adviser if applicable

Adviser's name/firm

Adviser's email address

FCA number

Agency code (if known)

Please tick all which apply

☐ Cancellation rights apply ☐ Discretionary business ☐ Advised business

☐ Execution only ☐ Portfolio management services

Adviser's firm stamp

Section C - Associated Parties This section is mandatory

We are required to know who has control or ownership of a corporate body, trust or other legal arrangement. This includes **Persons of Significant Control, Directors, Signatories, Trustees and Beneficial Owners**.

Controlling persons are the natural persons who exercise control over an entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries, and any other natural person exercising ultimate effective control over the trust. In the case of a legal arrangement, other than a trust, such term means persons in equivalent positions.

Beneficial owners are individuals who own or control more than 25% of the shares or voting rights, or are entitled to more than 25% of the entity's capital or profits.

Please provide details here and if there is not enough room to list all associated parties, please provide their details under separate cover.

Associated Party 1

Title

Surname

First name(s)

Permanent residential address

Postcode

Country

Date of birth

Nationality

Please indicate role. Tick all that apply

Controlling Person ☐ Director ☐ Signatory ☐ Trustee ☐ Beneficial Owner ☐

Section C Continued

Associated Party 2

Title Surname First name(s)

Permanent residential address

Postcode Country

Date of birth Nationality

Please indicate role. Tick all that apply

Controlling Person ☐ Director ☐ Signatory ☐ Trustee ☐ Beneficial Owner ☐

Associated Party 3

Title Surname First name(s)

Permanent residential address

Postcode Country

Date of birth Nationality

Please indicate role. Tick all that apply

Controlling Person ☐ Director ☐ Signatory ☐ Trustee ☐ Beneficial Owner ☐

Associated Party 4

Title Surname First name(s)

Permanent residential address

Postcode Country

Date of birth Nationality

Please indicate role. Tick all that apply

Controlling Person ☐ Director ☐ Signatory ☐ Trustee ☐ Beneficial Owner ☐

Section D - Entity Tax Residency and Tax Classification

Tax regulations require IFS to collect certain information about your tax residency and tax classification. IFS may be obliged to share information about your account(s) with relevant tax authorities. If you have any questions about your entity's classifications below, please contact your tax adviser.

Tax residency information

If your entity has more than one country of tax residency, please complete for each country.

Country	Tax Reference Number

If US has been entered as a country of tax residency and the entity is **not** a US Specified Person please tick this box ☐

The term "US Specified Person" means a U.S. Person, other than:

- (i) a corporation the stock of which is regularly traded on one or more established securities markets;
- (ii) any corporation that is a member of the same expanded affiliated group, as defined in section 1471(e)(2) of the U.S. Internal Revenue Code, as a corporation described in clause (i);
- (iii) the United States or any wholly owned agency or instrumentality thereof;
- (iv) any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing;
- (v) any organisation exempt from taxation under section 501(a) or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code;
- (vi) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (vii) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (viii) any regulated investment company as defined in section 851 of the U.S. Internal Revenue Code or any entity registered with the Securities Exchange Commission under the Investment Company Act of 1940 (15 U.S.C. 80a-64);
- (ix) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (x) any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code;
- (xi) a dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any State; or
- (xii) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code.

Section D Continued

Entity's classification under The Foreign Account Tax Compliance Act (FATCA)

If your entity is a Financial Institution, please tick which type.

Type of Financial Institution

Tick

Exempt Beneficial Owner

☐

UK Financial Institution or a Partner Jurisdiction Financial Institution

☐

Participating Foreign Financial Institution (in a non-IGA jurisdiction)

☐

Deemed Compliant Foreign Financial Institution (besides those listed above)

☐

Financial Institution resident in the USA or in a US Territory

☐

Non-Participating Foreign Financial Institution (in a non-IGA jurisdiction)

☐

If your entity is not a Financial Institution, please tick the entity's FATCA status below:

Entity Type

Tick

Active Non-Financial Foreign Entity (ANFE), or

☐

Passive Non-Financial Foreign Entity (PNFE)

☐

If your entity is a PNFE, each of your Controlling Persons must complete a Tax Residency Self Certification Form CRS-CP. This is available from the IFS website www.ifslfunds.com

US Tax Resident

Tick this box if your entity is any of the following and therefore not a Specified US Person ☐

- A regularly traded corporation on a recognised stock exchange
- Any corporation that is a member of the same expanded affiliated group as a regularly traded corporation on a recognised stock exchange
- A government entity
- Any bank as defined in section 581 of the U.S. Internal Revenue Code
- A retirement plan under section 7701(a)(37), or exempt organisation under section 501(a) of the U.S. Internal Revenue Code, or
- Any other exclusion listed (see above for Specified U.S. Person)

Entity's classification under the Common Reporting Standard (CRS)

Please tick only one box with reference to your entity's tax residency stated above.

Type of Financial Institution

Tick

Financial Institution. This includes Non-Reporting Financial Institutions such as a pension scheme, Government Entity or an International Organisation

☐

A professionally managed Investment Entity outside of a CRS Participating Jurisdiction. If this box is ticked, please include a CRS-CP form for each of your Controlling Persons

☐

Active Non-Financial Entity which is regularly traded on an established securities market or affiliated thereto, a Governmental Entity or an International Organisation

☐

Active Non-Financial Entity (other than those listed in 3 above)

☐

Passive Non-Financial Entity. If this box is ticked, please include a CRS-CP form for each of your Controlling Persons

☐

Investment Fund Services Limited (IFSL) is registered in England and Wales No. 06110770. Authorised and regulated by the Financial Conduct Authority and a member of The Investment Association.

Section E - Investment Details

Please provide details of your investment choices. This section is mandatory

Fund name	ISIN of Fund (as shown in KIID)	Lump sum amount	Regular monthly amount
1.		£	£
2.		£	£
3.		£	£
4.		£	£
5.		£	£
TOTAL		£	£

You can find minimum investment amounts and regular savers eligibility in the relevant fund prospectus.

Investing a lump sum:

Phone us, to **pay by debit card**.

Alternatively, you can **pay by cheque**, made payable to Investment Fund Services Limited.

Investing monthly: Please fully complete **Section G** Mandate Details. Detach and keep the Direct Debit Guarantee for your reference.

Payment must come from a bank account in the name of the Account Holder. We're unable to accept payment from a third party.

Section F - Future Income and Withdrawal Instruction

This section is mandatory

Income options

Where you have chosen to invest in a fund that pays income, you can choose how you would like it paid.

Please tick one option:

☐ REINVEST IN FUND

☐ PAY TO BANK ACCOUNT

Withdrawals

When you choose to take out part, or all, of your investment, we'll make payment direct into a nominated bank account.

Nominated bank details

Please provide bank details that any future income and withdrawals are to be paid to. Payment can only be made to the Account Holder.

We don't offer payment by cheque.

Name of bank/building society

Name of account

Bank account number

N | N | N | N | N | N | N | N

Sort code

X | X | - | X | X | - | X | X

Roll number/building society reference

Section G - Mandate Details Instruction to your bank or building society to pay by Direct Debit

To: The Manager

Bank/Building society

Address

Postcode

Name(s) of Account Holder(s)

Bank/Building society Account Number

Branch sort code

Please be aware that any bank details provided in this section will override any existing bank details that we may hold for you, unless otherwise stated.

Service User: Investment Fund Services Ltd (IFSL), Marlborough House, 59 Chorley New Road, Bolton BL1 4QP

Service User No: 2 4 6 5 6 6

Reference: (to be completed by IFSL)

Instruction to your Bank or Building Society: Please pay IFSL Direct Debits from the account detailed on this instruction subject to the safeguards assured by the Direct Debit Guarantee. I understand that this instruction may remain with IFSL and if so, details will be passed electronically to my Bank/Building Society.

Print name

Signature Date

We will write to you to confirm the date on which your Direct Debit will be collected.

Section H - Authorised Signatories This section is mandatory

Please provide an original or certified copy of your most up to date signatory list.

Section I - Privacy Notice

We're committed to processing the personal data that you provide to us in line with the latest data protection and data privacy legislation in force within the United Kingdom. We'll use your information in order to provide the service detailed in this Application Form and to administer your investments, communicate with you and provide information on our products and services when you request it, to meet our legal obligations and for the purposes of fraud prevention.

Our full Privacy Notice

It's important that you read our full Privacy Notice, which explains how the personal information you give us will be used. The Privacy Notice can be found on our website at www.ifslfunds.com, or you can ask us for a copy.

Section J - Declaration Please ensure that you read and sign this section as this is mandatory

This must be signed by 2 people from your most up to date signatory list unless your signatory list indicates that only 1 person needs to sign

- I/We declare that I/We have read and understood the relevant Key Investor Information Document (KIID), the Supplementary Information Document (SID) and the IFSL Terms & Conditions and agree to be bound to these. I/We understand that these documents form part of the terms and conditions of my/our investment in the fund(s) and are available at www.ifslfunds.com
- I acknowledge that the full prospectus of the relevant fund(s) (which includes the risk warnings relevant to the fund(s) along with details of minimum investment amounts of the fund(s) and the dealing time deadlines for processing of subscriptions), are available from IFSL and also at www.ifslfunds.com
- To the best of my/our knowledge and belief, all statements made in this application form are true and correct and I/We shall inform the plan manager immediately of any changes herein
- I/We declare that I am/We are 18 years of age or over and I/We wish to buy units/shares as set out above at the buying price prevailing at the first valuation point following receipt of this completed application
- I/We declare that I am not/We are not US Person(s) (either a resident or citizen) and acknowledge that US Persons cannot hold units/shares in the fund(s)
- All subscriptions made and to be made belong to me/us
- I/We have read the IFSL Privacy Notice concerning the use of my/our personal data

Client Name

Client Signature Date

Client Name

Client Signature Date

Client Name

Client Signature Date

Client Name

Client Signature Date



Section K - The Direct Debit Guarantee

Please retain for your own records

Banks and Building Societies may not accept Direct Debit Instructions for some types of account. This guarantee should be detached and retained by the payer.

- This Guarantee is offered by all banks and building societies that accept instructions to pay Direct Debits
- If there are any changes to the amount, date or frequency of your Direct Debit IFSL will notify you 10 working days in advance of your account being debited or as otherwise agreed. If you request IFSL to collect a payment, confirmation of the amount and date will be given to you at the time of the request

- If an error is made in the payment of your Direct Debit, by IFSL or your bank or building society, you are entitled to a full and immediate refund of the amount paid from your bank or building society

– If you receive a refund you are not entitled to, you must pay it back when IFSL asks you to

- You can cancel a Direct Debit at any time by simply contacting your bank or building society. Written confirmation may be required. Please also notify us.

