Iridian UCITS Fund p.l.c. (the "Company")

Irish resident Application Form

Please ensure you read the prospectus for the Company and the most recent relevant supplement as may be amended from time to time (the "**Prospectus**") before completing this application form. Unless the context otherwise requires, all capitalised terms shall have the same meanings as in the Prospectus.

All applicants should complete ALL sections in full and sign the necessary declarations and representations in Section 6.

On completion using BLOCK CAPITALS, please fax or email the completed application form to the Company c/o the Administrator, together with supporting documentation required in connection with anti-money laundering and terrorist financing procedures detailed in Section 5.

Iridian UCITS Fund p.l.c.

c/o SEI Investments – Global Fund Services Limited Styne House Upper Hatch Street Dublin 2 Ireland

Fax: +353-1-477-4768

Telephone: +353-1-638-2440 E-mail: tadublin@seic.com

Telephone calls may be recorded.

No redemption or conversion or transfer requests will be processed prior to receipt of this form by electronic means or by fax and supporting documentation.

1 Registration Details

Please provide Registered Address by completing section (a) for individual investors/ individual trustees; (b) for corporate investors or corporate trustees; or (c) for intermediary/agent/nominee. If Mailing address is different from Registered Address then also complete section (d)

PO Box or C/O addresses will not be accepted.

(a) Individual investors/ individual trustees

Title:	Mr. 🗌	Mrs.	Miss 🗌	Ms 🗌	Other
Surname:					
Forename(s) in full:					
House number/name:					
Street:					
Town/City:					
County/State/Province:					
Post/Zip Code:					

Country:					
Email Address:					
Telephone No:					
Location of Telephone No (insert country name)					
Fax No:					
Nationality:					
Country of Birth					
Date of Birth:					
For trusts/estates please indicate name here:					
Investments may be reg more than two joint hold Please note that all joint	ders please p	provide the a	dditional det	ails on a se	parate sheet.
be sent to the first named Joint Applicant				·	
			Miss	Ms 🗌	Other
Joint Applicant	d holder only.		Miss		
Joint Applicant Title:	d holder only.		Miss		
Joint Applicant Title: Surname:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street: Town/City;	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street: Town/City; County/State/Province:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street: Town/City; County/State/Province: Post/Zip Code:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street: Town/City; County/State/Province: Post/Zip Code: Country:	d holder only.		Miss		
Joint Applicant Title: Surname: Forename(s) in full: House number/name: Street: Town/City; County/State/Province: Post/Zip Code: Country: Email Address:	d holder only.		Miss		

Nationality:	
Country of Birth	
Date of Birth:	
For trusts/estates please indicate name here:	
Savings Directive - Individua	I, and Joint Applicants Only
-	irements of Council Directive 2003/48/EC ('Savings Directive') d to supply the following information.
"dependent or associated terr Member State or a depender	and "residual entities" established in an EU Member State or a tory" who receive savings income from a paying agent in an EU or associated territory are taxed in the EU Member State or bry in which they are resident for tax purposes.
	rritory" includes Aruba, Netherlands Antilles, Jersey, Guernsey Virgin Islands, Cayman Islands, Montserrat, Turks and Caicos com time to time.
Town and Country of Birth:	
Country of issue of Passpo Official ID card:	ort/
If applicable, your I Identification Number ("TI issued by your country residence;	*
If applicable, please specify t country issuing TIN:	he
	purposes, please attach an original document containing you if not available, an identity document containing details of you
(b) Corporate sharehold	ers or corporate trustee
Place of Incorporation:	
Full Title of body corporate/corporate trustee:	
Account designation(s) (if applicable):	
House number/name:	
Street:	

Town/City	
County/State/Province	
Post/Zip Code:	
Country:	
Email Address:	
Telephone No:	
Location of Telephone No (insert country name)	
Fax No:	
For trusts/estates please indicate name here:	
Mailing contact name:	
Mailing address:	
Postcode:	
Email address:	
Telephone No:	
Location of Telephone No (insert country name)	
Fax No:	
Intermediary/Agent/Nominee	
	in a nominee name, please print clearly the name of the ot complete then any negotiated terms may not be applied:
Client Name:	
Correspondence Address if different to above):	
House number/name:	
Street:	
Town/City	

County/State/Province

Post/Zip Code:

(c)

Country:						
Telephone No:						
Location of Telephone No country name)	(insert					
Fax No:						
E-mail Address:						
Domicile:						
Mailing Address (if differ	ent from	abo	ve Registere	d Address):		
Title:	Mr. 🗌		Mrs.	Miss 🗌	Ms 🗌	Other
Surname:						
Name:						
House number/name:						
Street:						
Town/City:						
County/State/Province:						
Post/Zip Code:						
Country:						
Email Address:						
Telephone No:						
Location of Telephone No (insert country name)						
Fax No:						
For trusts/estates please indicate name here:						

(d)

2 Investment Details

I/We hereby apply to invest in the Company, as indicated in the table below:

Fund	Share Class	No. of Shares	Amount (in words)	Currency**
Iridian U.S. Equity Fund	Class I-USD- Accumulating			
Iridian U.S. Equity Fund	Class IP-USD- Accumulating*			
Iridian U.S. Equity Fund	Class I-USD- Distributing			
Iridian U.S. Equity Fund	Class R-USD- Accumulating			
Iridian U.S. Equity Fund	Class R-USD- Distributing			

^{*} Class IP-USD-Accumulating Shares are only available for subscription by such investors as may be approved by the Investment Manager in its absolute discretion.

Classes I-USD-Accumulating, IP-USD-Accumulating and R-USD-Accumulating are accumulating Classes and, therefore, it is not currently intended to distribute dividends to the Shareholders. The income and earnings and gains of each Class will be accumulated and reinvested on behalf of Shareholders. Classes I-USD-Distributing and R-USD-Distributing are distributing Classes. Dividends (if any) will be declared on an annual basis as at 31 December in each year and will be paid within four months.

3 Subscription Details

All payments must be made by telegraphic transfer to the relevant account(s) detailed below for settlement 3 Business Days after the relevant Subscription Day. Settlement must be made in the designated currency of the Class in which you are investing.

For Subscriptions in US Dollar Share Classes	
Bank:	The Northern Trust Intl Banking Corporation, NJ
SWIFT:	CNORUS33
Fedwire ABA:	026001122
Account Name:	Iridian UCITS Fund – USD
Account Number:	132795-20010
Reference****:	

^{****} Please quote Investor's Name and Class Name

^{**} Subscription monies for the Shares of each Class should be remitted in the designated currency of the relevant Class.

4 Investor Bank Account Details

Please state the details of the account to which redemption proceeds should be paid. Payments will only be made to a bank account held in the name of the registered investor. No third party payments will be made.

Amendments to investors' payment instructions will only be effected upon receipt of an instruction from an authorised signatory, please refer to appendix 2. In the case of joint applicants, instructions will only be made upon receipt of instruction signed by all applicants.

Name of Bank:	
Address of Bank:	
Country:	
Bank SWIFT/Sort code:	
Name of Account Holder:	
Account Number:	
Applicant's signature:	

5 Anti-Money Laundering and Countering Terrorist Financing Procedures

Under Irish legislation covering anti-money laundering and countering terrorist financing, the Company and the Administrator are required to obtain documentation to verify the identity and permanent address of all new clients. Failure to supply all of the necessary documentation will result in redemption payments being withheld.

The Administrator in its absolute discretion reserves the right to request from the applicant such other or additional documentation when it deems it appropriate to do so to enable the Administrator determine the applicant's compliance with applicable regulatory requirements or the applicant's anti-money laundering verification status on a risk sensitive basis and the applicant shall provide to the Administrator from time to time with such information as may reasonably be requested.

Each person acquiring Shares in the Company must satisfy the AML regulations at the time of subscription and at all times thereafter until such person cease to be a Shareholder. Accordingly, the applicant agrees to notify the Administrator promptly If there is any change with respect to any of the below information along with the declarations or representations (set out in Section 6) and to provide the Administrator with such further information as the Administrator may reasonably require.

<u>Details of all Directors/Trustees/Partners/Committee Members/Controllers as appropriate</u>

Name	Residential Address	Date of Birth	Occupation

Ultimate Beneficial Owner Details1

(Natural person(s) who will ultimately benefits from the shares regardless of how they are registered)

Name	Residential Address	Date of Birth	Occupation	PEP ² Y/N

¹**Ultimate Beneficial Owner** – Where no beneficial ownership information is provided, it will be assumed no beneficiary holds 25% or more of the assets of the entity

Politically Exposed Person - Is the ultimate beneficial owner a senior government, political or military official, or an immediate family member or close associate of such a person? If yes, please provide an original signed letter confirming the individual's *Source of Wealth* (see below) and attach to the subscription document.

(Description of the economic activity which has generated the net worth)

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.

6 Declarations, Representations and Signatures

By signing below:

- 1 I/We confirm that I/we am/are 18 years of age or over and have the full right, power and authority to make the investment pursuant to this application form whether this investment is my/our own name or is made on behalf of another person or institution.
- We declare that the KIID(s) have been provided to us in good time prior to making the application for Shares and that we have read and reviewed and understood the nature and the risks of the investments product that is being offered to us. We hereby acknowledge and agree that the updated KIID(s) for each Share Class is available at the Investment Manager's website at www.iridian.com and that we will read and review the most up-to-date version of the relevant KIID(s) prior to making any subsequent application for Shares in the relevant Fund.
- I/We hereby acknowledge that I/we have been offered the current Prospectus, KIID(s) and Memorandum and Articles of Association of the Company as may be amended from time to time and where applicable the most recent annual report or half-yearly report of the Company. Furthermore I/we hereby acknowledge that this application is based solely on the information contained in such documentation and that I/we am/are bound by the terms of the Prospectus and Memorandum and Articles of Association of the Company. We are aware that copies of the Prospectus, KIID(s), latest annual and semi-annual reports and other information may be obtained from the Company. We give full consent to receiving this information and the Prospectus, latest annual and semi-annual reports and KIID(s) by means of electronic communication. I/We acknowledge that I/we have been given a choice between hard copy and electronic delivery and I/we confirm that I/we have elected to receive any relevant documentation, including the KIID, electronically.
- Where we are investing as nominee, we shall provide our client(s) with the KIID(s) issued in respect of the relevant Share Class and we shall ensure that we do so in compliance with Commission Regulation (EU) No. 583/2010, as amended from time to time or by any supplemental legislation and in compliance with the applicable legislation in any jurisdiction in carrying out this activity. We shall maintain records of our provision of the KIID(s) to our clients and shall furnish such records to the Company, or its delegates, upon request.
- I/We hereby represent and declare that I/we am/are fully informed as to: (i) the legal requirements within my/our country for the purchase of Shares and are permitted to purchase the Shares under the laws and regulations of my/our home country in the manner in which the Shares have been offered and sold to me/us; (ii) any foreign exchange restrictions applicable to me/us; and (iii) any relevant tax considerations relating to me/us arising out of my/our purchase and ownership of Shares.
- I/We have such knowledge and experience in business and financial matters that I/we am/are capable of evaluating the merits and risks of an investment by me/us in the Shares and have considered the risk factors as set out in the Prospectus.
- 7 I/We have made arrangements for payment to be made to the relevant bank account(s) specified above for subscriptions.
- I/We acknowledge that this application form constitutes the agreement under which the I/we agrees to subscribe for Shares in the Company and shall be governed by the laws of Ireland.

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i.e. communication by means of posting on a website or emailing to the address provided in the subscription form.

In the event of any dispute or claim arising under this agreement or the Prospectus, or relating to his Shares in the Company I/we submit to the exclusive jurisdiction of the Irish Courts.

- 9 I/We acknowledge that the Company reserves the right to reject any application in whole or part without assigning any reason therefore.
- 10 I/We acknowledge that measures aimed at the prevention of money laundering may require verification of my/our identity.
- 11 I/We also warrant and declare that the monies being invested pursuant to this application do not represent directly or indirectly the proceeds of any criminal activity and the investment is not designed to conceal such proceeds so as to avoid prosecution for an offence or otherwise.
- I/We acknowledge that the Company or the Administrator also reserves the right to delay or refuse to make any redemption payment or distribution to a Shareholder without notice if any of the Directors or the Administrator suspects or is advised that the payment of any redemption or distribution moneys to such Shareholder might result in a breach or violation of any applicable anti-money laundering or other laws or regulations by any person in any relevant jurisdiction, or such refusal is considered necessary or appropriate to ensure the compliance by the Company, its Directors or the Administrator with any such laws or regulations in any relevant jurisdiction. I/We hereby hold the Company and the Administrator harmless and indemnify them against any loss arising as a result of a failure to process the application if such information has been required and has not been provided by me/us.
- 13 I/We acknowledge that the Company reserves the right to cancel without notice any contract for which payment has not been received by the relevant settlement date and to recover any losses incurred.
- If any of the foregoing representations, warranties or covenants ceases to be true or if the Company no longer reasonably believes that it has satisfactory evidence as to their truth, notwithstanding any other agreement to the contrary, the Company may be obligated to freeze my/our investment, either by prohibiting additional investments, investment may immediately be redeemed by the Company, and the Company may also be required to report such action and to disclose my/our identity to OFAC or other authority. In the event that the Company is required to take any of the foregoing actions, I/we understand and agree that I/we shall have no claim against the Company, the Investment Manager, the Administrator, and their respective affiliates, directors, members, partners, shareholders, officers, employees and agents for any form of damages as a result of any of the aforementioned actions.
- 15 I/We understand and agree that any redemption proceeds paid to me/us will only be paid to a bank account in my/our name and with a recognised financial institution.
- I/We agree to indemnify and hold harmless the Company, the Investment Manager, the Administrator, and their respective affiliates, directors, members, partners, shareholders, officers, employees and agents from and against any and all losses, liabilities, damages, penalties, costs, fees and expenses (including without limitation legal fees and disbursements) which may result, directly or indirectly, from any inaccuracy in or breach of any representation, warranty, covenant or agreement set forth in this section or in any document delivered by me/us to the Company or any of them and shall notify the Company immediately if any of the representations herein made are no longer accurate and complete in all respects.

17 Designated Bodies*** only

I/We declare that I am/we are licensed as....... (description) by the (regulatory body) under the laws of...... (country) and am/are thereby subject to regulations and/or guidelines which to the best of my/our. knowledge and understanding are in accordance with the Financial Action Task Force Recommendations ("FATF") on the prevention of money-laundering. We attach independent verification of our licensed status. This application is made in my/our name on behalf of my/our clients whose identity has been properly verified by me/us in accordance with the guidelines. Evidence of such verification will be retained for such period as is required by the country of our domicile and will be promptly supplied to the Administrator or the Company upon request. We confirm that we have adopted measures to prevent and detect the commission of an offence of financing terrorism and that all employees, directors and other officers have received the appropriate level of training to ensure these measures are applied. Furthermore, should our licence or registration as noted above be revoked or altered at any future time or if the situation with regard to any of the clients introduced has changed, we undertake to advise you immediately. We further confirm we will provide the Administrator with a letter of assurance in connection with these matters in a form acceptable to the Administrator, if requested.

A Designated Body is an individual or other entity which is regulated in respect of the provision of banking or investment services in a country which is a member of the European Union or the Financial Action Task Force.

- 18 I/We shall provide the Company with any additional information which it may reasonably request in connection with tax or other similar requirements in order to substantiate any representations made by me/us or otherwise and I/we authorise the Company or its agents to disclose such information relating to this application to such persons as they consider appropriate.
- 19 I/We hereby agree that if the Company is required to comply with the rules of Sections 1471 through 1474 (inclusive) of the Internal Revenue Code of 1986 of the US, as amended, any current or future regulations or official interpretations thereof, any agreement entered into thereunder, or any fiscal or regulatory legislation, rules or practices adopted pursuant to any intergovernmental agreement entered into in connection with the implementation thereof ("FATCA") in order to receive any payments without withholding tax, I / we will:
 - i. provide the Company (or any nominated service provider) with any information, declarations, certificates or documentation necessary for FATCA reporting; and
 - ii. permit the Company to:
 - a. share such information with the US Internal Revenue Service, Irish Tax Authorities or other relevant tax or other government authority as required by FATCA;
 - b. compel or effect the sale of the Shares or repurchase and cancel the Shares if it fails to comply with the foregoing requirement; and
 - c. make any other amendments to any other documents entered into in connection with the subscription as may be necessary to enable the Company to comply with FATCA.
- I/We declare that I/we: (i) am/are not a US Person; (ii) have not been solicited to purchase and have not or will not acquire Shares while present in the United States; (iii) am/are not purchasing Shares as a nominee of a US Person and am/are not acting on behalf of nor do I/we intend to transfer any shares to any US Person(s); (iv) am/are not acquiring Shares for the benefit of a US Person and will not at any time hold Shares, directly or indirectly, for the account or benefit of any US Person; (v) am/are not to transfer any Shares or any interest

therein to a US Person and will not transfer any Shares within the United States; (vi) am/are not using funds that have been obtained from a US Person to effect the purchase of Shares; and (vi) will immediately notify the Company if I/we should at any time become a US Person. I/We agree to substantiate the foregoing representation upon request.

- The Company and the Administrator are hereby authorised to accept and execute any instructions in respect of the Shares to which this application relates or which may in future be acquired by me/us which are given by me/us in written form or by facsimile and in the case of joint account holders which are given by such means jointly by the applicants ("Instructions"). I/We hereby agree to indemnify each of the Company, and the Administrator and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any of them acting upon Instructions. The Company and the Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any Instructions believed in good faith to be genuine and to be signed or given by properly authorised persons.
- I/We agree to provide to the Company 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. Should any information furnished to any of them become inaccurate or incomplete in any way, I/We hereby agree to notify the Company or the Administrator immediately of any such change and further agree to request the redemption of Shares in respect which such confirmations have become incomplete or inaccurate where requested to do so by the Company.
- 23 I/We understand that the confirmations, representations, declarations, indemnities and warranties made or given herein are continuous and apply to all subsequent purchases of Shares by me/us in the Company.
- 24 (In respect of joint applicants only) We direct that on the death of one of us the Shares for which we hereby apply to be held in the name of and to the order of the survivor or survivors of us or the executor or administrator of the last survivor. I/We acknowledge and agree that in the event of the death of one or more of us the Administrator will require further documentation in relation to any proposed change of name or authority to act in respect of the Shares for which we hereby apply including without limitation a copy of the relevant Grant of Probate or copy of a will.
- I/We hereby acknowledge that any notice or document may be served by the Company on me/us in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000, if I have provided an e-mail address or fax number to the Company or its delegate, consent to any such notice or document being sent to me/us by fax or electronically to the fax number or e-mail address previously identified to the Company or its delegate which I/we acknowledge constitutes effective receipt by me/us of the relevant notice or document. I/we acknowledge that I/we are not obliged to accept electronic communication and may at any time choose to revoke my/our agreement to receive communications by fax or electronically by notifying the Company in writing at the above address provided that my/our agreement to receive communications by fax or electronically shall remain in full force and effect pending receipt by the Company of written notice of such revocation.
- We confirm that the persons listed on the attached authorised signatories list and whose specimen signatures appear on that list are duly authorised to give Instructions with respect to Shares held by us in the Company (For corporate applicants only.)

27 Data Protection/Information about other investment services

Your 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. Your information will be processed 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. The Administrator or Company will disclose your information to third parties where necessary or for legitimate business interests. This may include disclosure to third parties such as auditors, the Irish Tax Authorities pursuant to the EU Savings Directive, the U.S. Foreign Account Tax Compliance Act and the Central Bank or agents of the Administrator who process the data for anti-money laundering purposes or for compliance with foreign regulatory requirements. The applicant hereby consents to the processing of his/her information, which may include the recording of telephone calls with the Administrator for the purpose of confirming data, and the disclosure of his/her information as outlined above and to the Investment Manager and where necessary or in the Company's or the Administrator's legitimate interests to any company in the Administrator's and/or the Investment Manager's group of companies or 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 to object to the processing of my/our data for direct marketing purposes by written request to the Company free of charge.

28 EU Savings Directive Declarations

Natural Persons

- I/We hereby declare that I/we am/are making this investment on my/our own behalf and not on behalf of any other person or entity.
- I/We acknowledge that I/we will provide a certified copy of our Passport or a national identity card which must display a photograph and give details of my/our date and place of birth. We will also provide details of my/our tax identification number if this does not appear on the Passport or other identity card provided. Documentary proof such as a certificate of tax residency from a relevant tax authority may also be required. These items are in addition to providing proof of my/our permanent resident residential address which may be in the form of a utility bill which is no more than 3 months old.
- I/We agree undertake to ensure all such information is up to date and will notify the Administrator of any change in the information provided as soon as reasonably possible.
- I/We agree to indemnify and hold harmless the Administrator in its capacity as "Paying Agent" against any loss liability costs or expenses which may be incurred by the Administrator as a result of my /our failure to provide the information required. I/We acknowledge that Shares may not be issued and repurchase proceeds may be frozen until all required information and documentation required by the Administrator pursuant to the EU Savings Directive is provided.

Legal Persons

We hereby declare that we are:

- a legal person not being an individual and not acting in a representative capacity on behalf of an individual; or
- an entity liable to corporation tax in Ireland or an equivalent tax in another country; or
- an undertaking for collective investment in transferable securities ("UCITS") or have elected for the purpose of the EU Savings Directive to be treated as a UCITS.

 If the Legal Person is unable to make any of these declarations please contact the Administrator

29 Certification of Non-US Status

Please send to the Administrator together with your Application Form, the appropriate US W-8 tax form, completed and signed as required.

Please see the links set out below to US Internal Revenue Service website, for the various US W-8 tax forms and instructions for their completion:

W-8BEN http://www.irs.gov/pub/irs-pdf/fw8ben.pdf
W-8BEN-E http://www.irs.gov/pub/irs-pdf/fw8bene.pdf
W-8IMY http://www.irs.gov/pub/irs-pdf/fw8imy.pdf
W-8ECI http://www.irs.gov/pub/irs-pdf/fw8eci.pdf
W-8EXP http://www.irs.gov/pub/irs-pdf/fw8exp.pdf

You hereby acknowledge that neither the Company, the Fund, the Investment Manager, the Investment Manager, nor the Administrator is a tax advisor and they are each unable to advise on the completion of the relevant US W-8 tax form.

30 Certification of US Status

Please send to the Administrator together with your Application Form, a US W-9 tax form, completed and signed as required.

Please see the link set out below to US Internal Revenue Service website, for the various US W-9 tax forms and instructions for its completion:

W-9 http://www.irs.gov/pub/irs-pdf/fw9.pdf

7 Revenue Declarations

Declaration referred to in Section 739D(6) of the Taxes Consolidation Act 1997 ("TCA")

It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of shares.

- I declare that the information contained in this declaration is true and correct.
- I also declare that I am applying for 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) TCA, 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;	
an investment undertaking;	
an investment limited partnership;	
a special investment scheme;	
a unit trust to which section 731(5)(a) TCA applies;	

a charity being a person referred to in section 739D(6)(f)(i) TCA;	
a qualifying management company for the purposes of Finance Act 2010 entitled to exemption from income tax and capital gains tax by virtue of section 784A(2) TCA* or by virtue of section 848E TCA* (see further requirements 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:
 - o form part of the assets of a body of persons or trust treated by the Irish Tax Authorities as a body or trust established for charitable purposes only, or
 - are, according to rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Irish Tax Authorities.
- I undertake that, in the event that the person referred to in paragraph (7)(d) of Schedule 2B TCA ceases to be a person referred to in Section 739D(6)(f)(i) TCA, 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 / qualifying savings manager / PRSA administrator

- I/We* also declare that at the time of making this declaration, the shares in respect of which this declaration is made:
 - are assets of an *approved retirement fund / an approved minimum retirement fund, a special savings incentive account 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 the assets of the *approved retirement fund / the
 approved minimum retirement fund, a PRSA, or held in a special savings incentive account,
 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.

Additional requirements where the declaration is completed by an Intermediary

I/We* 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.

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
 persons referred to in section 739D(6) TCA; 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.

*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 Irish Tax Authorities 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 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 the Irish Tax Authorities. In case of a qualifying fund manager / qualifying savings manager, quote the tax reference number of the beneficial owner of the shares.
- 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. It must also be signed by a qualifying fund manager of an approved retirement fund/an approved minimum retirement fund, by a qualifying savings manager of a special savings incentive account or by a 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. If the latter, a copy of the power of attorney should be furnished in support of this declaration.

Return of Values (Investment Undertakings) Regulations 2013 Declaration

Pursuant to the Return of Values (Investment Undertakings) Regulations 2013 (S.I. 245 of 2013), the Fund is required to collect certain information from non-Exempt Irish Shareholders. All applicants, whether individuals, bodies corporate or unincorporated bodies of persons, which are Irish resident or ordinarily resident should review the list of Exempt Irish Shareholders set out below.

If the applicant is Irish resident and is not an Exempt Irish Shareholder, please provide the following information and documentation:

Tax Identification Number (TIN) / PPS	
Number	

Any one of the following additional documents is required to verify the TIN or PPS Number (either an original or a copy will suffice):

- 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
- Public Services Card

In addition, printed documentation issued by the Irish Tax Authorities or the Department of Social Protection which includes your name, address and tax reference number is also 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, the Fund or its duly appointed delegates as Data Processor for the Fund in accordance with the Data Protection Acts 1988 to 2003. 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 Tax Authorities.

Exempt Irish Shareholders	TCA reference	
The following entities will constitute Exempt Irish Shareholders provide obtained a duly completed appropriate declaration:	ded that the Fund has	
An investment undertaking	739D(6)(c)	

An investment limited partnership	739D(6)(cc)
A pension scheme which is an exempt approved scheme	739D(6)a)
A company carrying on a life assurance business	739D(6)(b)
A special investment scheme	739D(6)(d)
A unit trust to which section 731(5) applies	739D(6)(e)
A charity	739D(6)(f)(i)
ARFs, AMRFs	739D(6)(h)
A qualifying fund manager	739D(6)(g)
A qualifying savings manager	739D(6)(g)
PRSA providers	739D(6)(i)
The National Pensions Reserve Fund	739D(6)(I)
The National Asset Management Agency	739D(6)(ka)
A Section 110 Company	739D(6)m)
A Credit Union	739D(6)(j)
An Irish resident company but only where the Fund is a money market fund	739D(6)(k)
A shareholder who holds their shares in a recognised clearing system	739B

Appendix 1

Account Maintenance Form							
	This fo	rm is not a	app	ropriate fo	r a	change of Tax ID#	
In order to update our records, please complete the Account Maintenance Form for your Fund accounts. If you have any questions, please call +3531 638 2440 between the hours of 9:00 a.m. and 5:30 p.m. (GMT), Monday to Friday.							
Please fax completed	document to +3	3531 477 4	1/6	8 or email	to	taDublin@seic.com	
Fund Name:							
Account Number:							
Account Name:							
Social Security or Ta	x Identification	n Number	:				
NEW CONTACT INFO	DRMATION						
Number and Street							
City		State				Zip Code	
Telephone (#1)				Telephon	e ((#2)	
Fax Number (#1)				Fax Num	be	r (#2)	
Email (#1)				Email (#2)			
ADD/DELETE INTED	COTED DART	,		A dal —			
ADD/DELETE INTER	ESTED PARTY	/		Add □ Delete □]		
-	ESTED PART\	(]		
Name	ESTED PARTY	<i>'</i>			1		
Name	ESTED PART	State			1	Zip Code	
Name Number and Street	ESTED PART]	Zip Code	
Name Number and Street	ESTED PARTY					·	
Name Number and Street City	ESTED PARTY			Delete	ıe ((#2)	
Name Number and Street City Telephone (#1)	ESTED PARTY			Delete	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1)				Telephon	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1)				Telephon	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1)				Telephon	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1)				Telephon	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1)				Telephon	ne ((#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1)	ACT INFO:	State		Telephon Fax Num Email (#2	ne (bei	(#2)	
Name Number and Street City Telephone (#1) Fax Number (#1) Email (#1) ADDITIONAL CONTA	ACT INFO:	State		Telephon Fax Num Email (#2	le (bei	(#2) r (#2)	

^{**}Note that this must be signed by current authorised signatories on the account.

Appendix 2

Investor Banking Detail Maintenance Form					
account(s). Please note that the	please complete this Form for applicable information related to your investor beneficiary banking detail must correspond to the registered account name – ed. Please ensure reason for change to wire detail is completed				
If you have any questions, plea	se call +353 1 638 2440 between 9:00 a.m. and 5:30 p.m. (GMT), Monday				
to Friday.					
	ted form to the following address noting the fund name in which your investor				
account is invested:					
<insert fund="" name="">, c/o SEI Invertible 2 Iron Fund Name:</insert>	estments- Global Fund Services, Investor Services Department, Styne House,				
Fund Name:					
Account ID:					
Account Name:					
	Receiving Account Details (1 St recipient account number and name) * may not be applicable				
Account Number :					
Account Name :					
	Receiving Bank Detail (1 St bank to receive the payment) * may not be applicable				
Bank Name:					
Bank Address:					
Bank ABA / SWIFT:					
	Final Beneficiary Account Details / FFC (Final recipient account number and name)				
Account number:					
Account name:					
IBAN (if applicable) :					
	Final Beneficiary Bank (Final bank to receive payment)				
Bank Name:					
Bank Address:					
Bank ABA / SWIFT:					
	Any Additional Information				
Reason for change to wire detail					
<u> </u>					
INVESTOR SIGNATURE:	JOINT INVESTOR SIGNATURE:				
PRINT NAME:	PRINT NAME:				
DATE:	DATE:				

**Note that this must be signed by current authorised signatories on the account.