

INDIVIDUAL SELF-CERTIFICATION

INSTRUCTIONS FOR COMPLETION

We are obliged under Section 891E of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to that section 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 obliged to share this information with relevant tax authorities.

All terms identified in italics are as defined in the Agreement between the Government of Ireland and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA, a copy of which is available [on the Irish Revenue website at <http://www.revenue.ie>]

If any of the information below about your tax residence or FATCA classification changes in the future, please ensure you advise us of these changes promptly.

If you have any questions about how to complete this form, please contact your tax advisor.

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

SECTION 1: INVESTOR IDENTIFICATION

Investor Name and Fund Name:

Investor Name

Fund Name

Residential Address:

Number

Street

City, town, State, Province or County

Postal Code

Country

Mailing address (if different from above):

Number

Street

City, town, State, Province or County

Postal Code

Country

Birth details:

Country of Birth

Date of Birth

SECTION 2: 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** a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal taxpayer identifying number

(U.S. TIN) is as follows: _____

OR

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



Northern Trust

SECTION 3: 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 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:

Date: (dd/mm/yyyy):

