

# Cantor Fitzgerald Ireland Ltd ("Cantor")

# **Professional - Credit Union Execution Only Account Opening Document**

# **HOW TO PROCEED**

AC	COUNT SET	UP CHECKLIST:				
1.	1. We have completed the attached application form in full and signed and dated same					
2.	2. We have completed the attached CRS/FATCA form and signed and dated					
3.	3. We have completed the attached authorised signatory template and printed on headed paper					
4.	We have	completed and attached the Corporate Declaration of Residence in Ireland (if applicable)				
5.		completed the supplementary forms (where required) - i.e Beneficial Ownership Declaration, Italian ption Form, Pershing Consent				
6.	Please also e	nclose the following (Document must be certified if the entity is <b><u>NON</u></b> Irish):				
	Copy of the latest Audited Accounts					
Post	/Delivery	Return the completed application and identification to:  DUBLIN: Cantor Fitzgerald Ireland Ltd, Cantor Fitzgerald House, 23 St Stephen's Green, Dublin 2  LIMERICK: Cantor Fitzgerald Ireland Ltd, Crescent House, Hartstonge St., Limerick  CORK: Cantor Fitzgerald Ireland Ltd, 45 South Mall, Cork				
Queries/Advice		Call your Financial Advisor or your Cantor Fitzgerald Account Manager:  DUBLIN: +353 1 633 3800. CORK: +353 21 422 2122. LIMERICK: +353 61 436 500				

Email Queries to Client Services at ireland@cantor.com

www.cantorfitzgerald.ie

# **Execution Only Account Opening Document**





Name Address  Tel Reg No.  LEI* Code *Legal Identifier Code  *Legal Identifier	
Tel Reg No.   Country of Incorporation   LEI* Code   Tax Identification No.   *Legal Identifier Code    2. Director Details (PLEASE USE BLOCK CAPITALS)  Director 1   Director 2   Title Mr   Mrs   Ms   Miss   Other   Title Mr   Mrs   Ms   Miss   Other   Surname   Surname   Forename(s)   Forename(s)   Residential   Address   Nationality   Nationality    3. Bank Details (PLEASE USE BLOCK CAPITALS)  Bank Name   Bank Address	
Tel Reg No.  Country of Incorporation LEI* Code  *Legal Identifier Code  *Lega	
Country of Incorporation  Tax Identification No.  *Legal Identifier Code	
Country of Incorporation  Tax Identification No.  LEI* Code *Legal Identifier Code  *Legal Identifier	
Tax Identification No.  *Legal Identifier Code  *Legal Identifier Code  2. Director Details (PLEASE USE BLOCK CAPITALS)  Director 1  Title	
2. Director Details (PLEASE USE BLOCK CAPITALS)  Director 1 Title	
Director 1 Title	
Director 1 Title	
Title Mr Mrs Ms Miss Other Title Mr Mrs Ms Miss Other  Surname  Forename(s)  Residential Address  Nationality  Nationality  Nationality  Nationality  Bank Details (PLEASE USE BLOCK CAPITALS)  Bank Address	
Surname  Forename(s)  Residential Address  Nationality  Nationality  Nationality  Nationality  Bank Name  Bank Address	
Forename(s)  Residential Address  Nationality  Nationality  Nationality  Nationality  Bank Name  Bank Address	Other
Residential Address  Nationality  Nationality  Nationality  Nationality  Bank Name  Bank Address	
Address  Nationality  Nationality  Nationality  Bank Name  Bank Address	
3. Bank Details (PLEASE USE BLOCK CAPITALS)  Bank Name  Bank Address	
3. Bank Details (PLEASE USE BLOCK CAPITALS)  Bank Name  Bank Address	
Bank Name Bank Address	
Bank Name Bank Address	
Bank Address	
Bank Address	
Account Name	
IBAN* BIC	XXX

PAGE 1

# L RELEVANT SECTIONS MUST BE COMPLETED

Signature

# **Execution Only Account Opening Document**

Professional Credit Union Account Application Form



4. Authori	sed Persons (please use block capitals)		
account, in	Persons on this account will be authorised by cluding to invest in any investment product or operate on the instruction of one Authorised	behalf of the C	
• PLEASE NO	TE: the below persons will be the key contact from or speak to regarding the account.		account and the only people we can take
Authorised	Person 1 (Key Contact Person)	Authorised	Person 2
Title	Mr Mrs Ms Miss Other	Title	Mr Mrs Ms Miss Other
Surname		Surname	
Forename(s)		Forename(s)	
Residential Address		Residential Address	
Email*		Email	
EIIIdii		EIIIdii	
Tel		Tel	
Signature		Signature	
This will be the	e lead email for account communications. An email addres	」 ss is required to ope	n an account.
Authorised F	Person 3	Authorised P	erson 4
Title	Mr Mrs Ms Miss Other	Title	Mr Mrs Ms Miss Other
Surname		Surname	
Forename(s)		Forename(s)	
Residential Address		Residential Address	
Email		Email	
Tal		Tol	

Signature

Original letter on the company headed paper signed by all Authorised Persons attached (to be ticked if applicable)

# EVANT SECTIONS MUST BE COMPLETED

# **Execution Only Account Opening Document**

Professional Credit Union Account Application Form



5. Source of Wealth/Funds (PLEASE USE BLOCK CAPITALS)								
Source of Wealth/Funds								
(i) Please indicate how your accumulated. You can indi		(ii) Please indicate the source of y Cantor. You can indicate more th						
Company Profits		Bank Deposit Account						
Property Investment		Saving Account						
Sale of Business		Transfer from other Investment P	ovider					
Equity/Fund Investment  Other (please specify):								
Other (please specify):								
for you. This is to enable us relevant.	to act in your best interest.	orm will be used by Cantor to carry ou Please provide additional information	where you feel it may be					
holder, beneficial owner or a		appointed to make decisions on behalf of two or more natural persons are require suitability assessment.						
(i) Please select your previous trading experience: (You can select more than one option if applicable)								
	EXECUTION ONLY (no advice)  ADVISORY (broker advises, you decide)  DISCRETIONARY/MANAGED (broker agrees investment parameters with you and has discretion to transact)  NO PREVIOUS EXPERIENCE							
		(broker agrees investment parameters						
		(broker agrees investment parameters						

# **Execution Only Account Opening Document**

Professional Credit Union Account Application Form



	THESE	COLUMN	IS ARE MA	NDATORY	THESE COLUMNS	ARE MANDATORY
FINANCIAL INSTRUMENTS	NONE**	BASIC	GOOD	EXTENSIVE	NUMBER OF YEARS EXPERIENCE	NUMBER OF TRADES IN THE LAST 5 YEARS (if 'zero' trades please note 0 in the box)
Equities						
Corporate Bonds						
Government Bonds						
Investment Funds						
Structured Products						
Corporate Finance/ Unquoted Investments						
Derivatives (CFD's, Options, Futures)						
Illiquid Investments (Cannot be easily accessed and/or not traded on an exchange)						
*If you have selected NONE for EXEPERIENCE and NUMBER Of (iii) If you have answered '0' for attained your years experience	F TRADES IN	OF TRADE	5 YEARS  S IN THE LA	AST 5 YEARS in	·	
		1.6	s or Exper	ience		
Investment Committee: Profe	ssional Qu	alification	5 OI EXPEN			
Investment Committee: Profe  1. Does the Client have an advi						Yes No

4. Are you a member of a professional body? e.g. ACOI, LIA, IIB, Chartered Accountants Ireland etc.

Yes

No 🗌

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# **Execution Only Account Opening Document**

Professional Credit Union Account Application Form



7. Research and Product Inform	nation	
Insights & Research Publications		
As part of our service offering, we regular Please select the communications you will	arly share key insights, research publications and updates on latest investment opportunities. sh to receive:	
Daily Note	Monthly Talking Points Newsletter Investment Bonds	
Weekly Trader	Corporate Finance Investments (Private Equity, EIIS Investments, Property Investments)	
Weekend Papers Summary	Ethical Investing	

Q	Pos	alutian	c of h	oard a	of di	rectors
o	· ves	olution	ט וט כו	valu	oı uı	I ECTOL2

We certify that at a meeting of the directors of	("Client"), duly convened and held on the
day of, 20, the following resolutions were duly passed.	

# • Authority to open a Securities dealing account

That an account or accounts be opened with Cantor Fitzgerald Ireland Ltd (the 'Company') at 75 Stephen's Green, Dublin 2 under the terms and conditions outlined in the foregoing Account Opening Document, the Terms and Conditions booklet and the conditions below. The Client authorises the persons specified in **Part 3** above to execute the Account Opening Document on their behalf.

The Client confirms the information provided by the nominated decision maker in section 6 is correct and understands that this is the information that will be used to determine the knowledge and experience of the client

# Authority to Cantor Fitzgerald Ireland Ltd (the 'Company')

That the Company be authorised and instructed to undertake the following:

# 1. To act on instructions on dealings with securities, etc.

Subject to the terms and conditions outlined in the Company's Account Opening Document to act on any instructions from the "Authorised Persons" specified in **Part 4** above (or as varied from time to time) with regard to the purchase or sale of, or other dealings, in securities or documents of the Client or any foreign currency transactions (without prejudice to the Company's right to refuse to allow accounts become overdrawn).

### 2. To honour orders

To honour and comply with any orders to withdraw any or all money on any account or accounts of the Client with the Company and with instructions to deliver, dispose of or deal with any securities, deeds or documents or other property whatsoever from time to time in the Company's possession for the account or accounts of the Client whether by way of security or safe custody or otherwise provided that the instructions are received as agreed with the Company.

# Not to restrict Company's right to lien, etc.

The Client agrees that nothing in the arrangements between the Company and the Client shall be treated as constituting, an implied agreement restricting or negating any lien, charge, pledge or right of set-off.

### To furnish the Company with:

Such Customer Due Diligence Documentation as required by the Company prior to account opening.

### • To provide list of directors, etc.

That the Company be furnished with a list of the names of the Directors, Secretary and other officers of the Client and with specimens of their signatures and that the Company be notified immediately in writing signed by any Director or the Secretary of the Client of any changes which may from time to time take place in these details and be entitled to act on any such notice and that until receipt of such notice the Company may continue to treat the last list received as correct.

# • Change in Decision Maker

The Client undertakes to inform CFIL if the nominated decision maker is no longer valid (ie. is no longer a beneficial owner/authorised signatory of the client). On such an event, the client acknowledges that it is its responsibility to nominate a new decision maker for the purposes of providing the information in section 6 for the assessment required.

## To communicate resolutions to the Company

That these resolutions be communicated to the Company and shall constitute the Account Opening Document and remain in force until an amending resolution shall be passed by the board of Directors and a copy of such resolutions certified by any Director or the Secretary of the Client shall be communicated to the Company.

## Interpretation

That in this resolution the expressions Director(s) and Secretary shall be construed as Director(s) and Secretary of the Client and shall, in the case of Director(s) include Alternate Director(s) and in the case of Secretary, shall include any Joint Secretary, Assistant Secretary or Temporary Secretary.

Please continue to next page

# **Execution Only Account Opening Document**





# 8. Resolutions of board of directors Continued

### Statements of Account

The Client agrees that it will examine all statements supplied by the Company setting out transactions on any of its account within 30 days.

### · Entry of resolutions in minute book

We certify that the above resolutions have been duly entered in the minute book and signed by the Chairman and are in accordance with the Articles of Association of the Company and are, at this date, in full force and effect.

DIRECTOR'S SIGNATURE	DIRECTOR'S SIGNATURE		
Print Name	Print Name		
Date Signed DD MM YY	Date Signed DD MM YY		

# 9. Acknowledgement

In signing this document it will constitute a contract, both legally binding and enforceable. If you have any queries about any aspect of the account opening documentation please contact Cantor Fitzgerald Ireland Ltd for clarification or, if you think it appropriate to do so, obtain independent legal advice.

Subject to the information provided in this document Cantor Fitzgerald Ireland Ltd is categorising you as a Professional Client.

In categorising this entity as a professional client it is assumed that the authorised person(s) and Board of the Credit Union have

- The necessary knowledge and experience to understand the risks involved in transactions the Credit Union enter into and the investment services we provide to the Credit Union
- The financial circumstances to bear any related investment risks.

The undersigned hereby acknowledge that:

- (a) We have carefully read, acknowledge and understand the terms of the below listed documentation which we have been presented with and have had an opportunity to consider. We hereby agree that by signing this acknowledgement that we will be bound by all terms and conditions contained in the following documents:
  - 1. Professional Credit Union Account Opening Document Execution Only
  - 2. Professional Terms and Conditions booklet:
    - i. Terms and Conditions of Service
    - ii. Conflicts of Interest Policy
    - iii. Order Execution Policy
    - iv. Information on Financial Instruments
  - The authorised persons detailed in this account opening document are authorised by the Board of the Credit Union to give all instructions on this account including to invest in any investment products
  - The final decision to invest in any investment instrument or investment product rests solely with the Board of the Credit Union and Cantor will accept all instructions from the authorised persons detailed in this account opening document
- (b) The service description set out in the Terms and Conditions booklet incorporates the service to be provided by Cantor Fitzgerald Ireland Ltd to us in its entirety and for which we now hereby apply, in addition specifically acknowledge the following:
  - Cantor Fitzgerald Ireland Ltd will not be responsible to deem whether an investment service is suitable or appropriate in the context of our investment experience and financial situation.
  - We acknowledge that we will not be eligible to make a claim under the Investor Compensation Act, 1998.
- (c) Should there be a change in our circumstances and we no longer deem ourselves able to properly assess or manage the risks involved with our investment decisions as a Professional Client, we will request the higher level of protection offered under the Retail Client category. We understand that we will remain a Professional Client until such time as Cantor confirms in writing that we have been re-categorized.

Please continue to next page

# RELEVANT SECTIONS MUST BE COMPLETED

# **Execution Only Account Opening Document**

Professional Credit Union Account Application Form



# 9. Acknowledgement

- (d) The details provided in the Account Open Document is a complete and accurate record of all information relevant and necessary to allow Cantor Fitzgerald Ireland Ltd to provide an execution only service to the Credit Union.
- (e) We acknowledge that Cantor Fitzgerald Ireland Ltd will arrange for a nominee account to be opened with Pershing Securities International Limited on our behalf.
- (f) I/We have been presented with and have had an opportunity to consider the **Client Asset Key Information Document** and I/we have carefully read, acknowledge and understand the arrangements Cantor have put in place for holding client assets and the risks associated with them
- (g) We have been presented with a current rate card and we are aware that any changes to this will be updated to the Cantor Fitzgerald website for our reference.
- (g) Electronic Communications

By opening an account with Cantor Fitzgerald Ireland you are consenting to the electronic delivery of communications and documentation through our online portal, to which we will issue you the necessary access as part of account opening process. Within our online portal you can view your account information, transactions, documentation and communications.

If you do not want documentation issued to you electronically please tick the box below:

I/We wish to receive any communications and documentation issued to my/our client portal in paper format.

Please note if you choose NOT to avail of electronic communications through our online portal charges may be incurred for paper documentation. These charges will be deducted from your account. Please see our rate card for further details.

You may receive periodic documentation in paper format not related to this consent.

Client Acceptance DIRECTOR'S/AUTHORISED SIGNATORY'S SIGNATURE	DIRECTOR'S/AUTHORISED SIGNATORY'S SIGNATURE
Print Name	Print Name
Date Signed DD MM YY	Date Signed DD MM YY

**CANTOR FITZGERALD - DUBLIN:** Cantor Fitzgerald House, 23 St Stephen's Green, Dublin 2, D02 AR55. Tel: +353 1 633 3800. Fax: +353 1 633 3856. **CORK:** 45 South Mall, Cork, T12 XY24. Tel: +353 21 422 2122. **LIMERICK:** Crescent House, Hartstonge St., Limerick, V94 K35Y. Tel: +353 61 436500.

email: ireland@cantor.com web: www.cantorfitzgerald.ie

# **CRS/FATCA Individual/Entity Self-Certification**

Please see our useful forms section on our website for the Common Reporting Standard "CRS" and Foreign Account Tax Compliance Act "FATCA" Appendix with further definitions and information on the below classifications

Self-Certification	tor FAICA and CRS (PLEASE USE	BLOCK CAPITALS)
	N HOW TO COMPLETE THIS vant account type and complete Se Joint Cantor PRSA	
Please select the rele	vant account type, and complete Se	ection 1(b), 2, 3, 4 (if applicable) and 5.
		tutional Pension (e.g. Trust Structure) Partnership
	y (Please note legal structure):	
		oply to your account type please complete the form as per your lo
SECTION 1: Accou	ınt Details	
1(a): Personal Details	Please complete if applicable to your a	account type, based on the instructions noted above:
Person 1	Thease complete it applicable to your t	Person 2
	Mrs Ms Miss Other	Title Mr Mrs Ms Miss Other
Surname		Surname
Forename(s)		Forename(s)
Residential Address		Residential Address
1(b): Entity Details Pl	ease complete if applicable to your acc	ount type, based on the instructions noted above:
Entity Name (Legal)		
Registered Address		
Tregistered 7 tadress		Country:
SECTION 2: Decla	ration of Person or Entities Ta	ax Residency All account types MUST complete
Name of Person/Entity	Country of Tax Residency( <u>List</u>	all) Tax ID Number (TIN) If TIN not available, please indicate rea
SECTION 2: Entite	y's Classification Plans are lated	f applicable to your account type, as per the instructions at the sta
this form	S Classification Please complete i	applicable to your account type, as per the instructions at the sta
You are required to cho	pose one CRS classification and one FA	CA classification within this section
You MUST choose one		C. C
FATCA Classification	'	GIIN (if applicable)
Reporting Model 1	FFI	
Reporting Model 2	FFI	
(continued on following	g page)	

# ALL RELEVANT SECTIONS MUST BE COMPLETED

# **CRS/FATCA Individual/Entity Self-Certification**



Participating FFI	
Registered Deemed Compliant (other than Reporting Model 1 FFI/Sponsored FFI or Non-Reporting IGA FFI) Sponsored Direct Reporting NFFE	
Direct Reporting NFFE	
Sponsored FFI	
Non-Reporting IGA	
Foreign Government	
Entity Wholly Owned by an Exempt Beneficial Owner	
501 (c) Organization	
International Organization	
Exempt Retirement fund	
Active Non-Financial Foreign Entity	
Non-Profit Organization	
Passive Non-Financial Foreign Entity (also complete Section 4 for Controlling Persons)	
Other Specify:	
f the GIIN provided above is issued in the name of your sponsor, pleas	o provide your spenser's name and spensor's GIIN
	e provide your sportsor's frame and sportsor's Gilly
Name of the sponsoring Entity  SlIN number of the sponsoring Entity	
silly fluttiber of the sponsoring Efficiency	
ou MUST choose one of the below options:	
CRS Classification	
Financial Institution other than investment entity (custodial institut	on, depository institution/specified insurance company)
Financial Institution non-reporting according to local jurisdiction le	gislation where you are a resident
Investment Entity with Tax Residence in a non-participating jurisdic	tion and managed by another Fl
(also complete Section 4 for Controlling Persons)	
Passive Non-Financial Entity (also complete Section 4 for Control	
Active Non-Financial Entity which is a Government/Central Bank/In	ternational Organization
Active Non-Financial Entity (corporation that is publically traded or	an affiliate of a publicly traded corporation)
Active Non-Financial Entity-other	
Other investment entity	

# **CRS/FATCA Individual/Entity Self-Certification**



# Self-Certification for FATCA and CRS (PLEASE USE BLOCK CAPITALS)

**SECTION 4: CRS and FATCA – Controlling Persons ("CP") Identification** Please complete this section if you have completed section 1(b) **AND** have selected an entity classification, in the previous section, that notes section 4 must be completed.

- For a Trust this includes the settlor, the trustees, the protector (if any) and any known beneficiaries
- For a Corporation or Non-Corporate entity (other than a Trust) this would include natural persons who own or control, directly or indirectly, 25% or more of the entity
- Where no natural person is identified, the senior managing official is a controlling person
- TIN or equivalent must be provided
- Refer to table below for CP types

Controlling

## Should the below space not be sufficient, please provide information on a separate sheet.

Should Controlling Persons have more than one tax residence, please use the below space or provide information on a separate sheet.

Persons type code	Date of birth (dd/mm/yyyy)	Full residence address	Tax residence country	TIN /If TIN not available please indicate reason

<sup>\*</sup>By signing you are confirming the information to be accurate and complete.

# **Controlling Persons Type codes:**

CP of legal person – ownership	801	CP of legal arrangement – trust – other	808
CP of legal person – other means	802	CP of legal arrangement – other – settlor-equivalent	809
CP of legal person – senior managing official	803	CP of legal arrangement – other – trustee-equivalent	810
CP of legal arrangement – trust – settlor	804	CP of legal arrangement – other – protector-equivalent	811
CP of legal arrangement – trust – trustee	805	CP of legal arrangement – other – beneficiary-equivalent	812
CP of legal arrangement – trust – protector	806	CP of legal arrangement – other – other-equivalent	813
CP of legal arrangement – trust – beneficiary	807	Unknown	UN

PAGE 3 Please continue to next page

# **CRS/FATCA Individual/Entity Self-Certification**



# **Self-Certification for FATCA and CRS** (PLEASE USE BLOCK CAPITALS)

# SECTION 5: Declaration and Undertakings All account types MUST complete

- (a) I declare that all statements made in this declaration are, to the best of my knowledge and belief, correct and complete.
- (b) I acknowledge that the information contained in this form and information regarding the Account Holder and any Reportable Account(s) may be provided to the tax authorities of the country/jurisdiction in which this account(s) is/are maintained and exchanged with tax authorities of another country/jurisdiction or countries/jurisdictions in which the Account Holder may be tax resident pursuant to intergovernmental agreements to exchange financial account information under the Common Reporting Standard (CRS) and Foreign Account Tax Compliance Act (FATCA).
- (c) I certify that I am the Account Holder (or am authorised to sign for the Account Holder) of all the account(s) to which this form relates.
- (d) If there is a change in circumstances that affects the tax residence status of the Account Holder or causes the information contained herein to become incorrect or incomplete, I understand that I am obligated to inform Cantor Fitzgerald Ireland of the change in circumstances within 30 days of its occurrence and to provide a suitably updated CRS or FATCA self-certification.

# **Client Acceptance**

If you completed section 1(a) please ensure all beneficiaries sign below:

PERSON 1	PERSON 2 (if applicable)
Print Name	Print Name
Date Signed DD MM YY	Date Signed DD MM YY
If you completed <u>section 1(b)</u> please ensure the relevant authorised s	signatories sign below:
AUTHORISED SIGNATORY 1	AUTHORISED SIGNATORY 2 (if applicable)
Print Name	Print Name
Date Signed DD MM YY	Date Signed DD MM YY

CANTOR FITZGERALD - DUBLIN: Cantor Fitzgerald House, 23 St Stephen's Green, Dublin 2, D02 AR55. Tel: +353 1 633 3800. Fax: +353 1 633 3856. CORK: 45 South Mall, Cork, T12 XY24. Tel: +353 21 422 2122. LIMERICK: Crescent House, Hartstonge St., Limerick, V94 K35Y. Tel: +353 61 436500.

email: ireland@cantor.com web: www.cantorfitzgerald.ie

Date:/					
To whom it may concern,					
Below is the list of authorised signa	atories for	Credit Union.			
Name:	Position:	Sample Signature:			
Namo	Namo				
Name:	Name:				
Signature:Authorised Signatory	Signature: Authorised Signator				
, tatilotised signatory	/ tathonised signator	7			

# **Declaration of Residence in Ireland**

# Please complete this section if the Declaration is being made by a **Company resident in Ireland.**

Name of Company:				
Address of Co	mpany:			
Irish tax refer	ence number for the Company:			
■ I declare that, at the time of making this declaration, the above-named company is beneficially entitled to the relevant distributions in respect of which this declaration is made, thereby being an "excluded person" for the purposes of Chapter 8A of Part 6 of the Act.				
I undertake that, in the event that the above-named company ceases to be an "excluded person", I will, by written notice, bring that fact to the attention of the "relevant person" in relation to the relevant distributions.				
Authorised Signatory: (Declarant) Title: (Mr./Ms. etc.)				
Print name of	Signatory here:			
Relationship t	to the above-named company:	Date:	/	
IMPORTANT:	This declaration must be signed by the company secretary or other au a person who holds power of attorney from the company. Where app power of attorney should be furnished in support of this declaration.			



Heritage House 23 St. Stephen's Green Dublin 2, Ireland Tel: +353 1 633 3800 Fax: +353 1 633 3865/633 3857 ireland@cantor.com www.cantorfitzgerald.le

# CONSENT AND CONFIRMATION OF INSTRUCTIONS FOR DEPOSIT OF CLIENT MONEY IN FIXED TERM DEPOSITS/BONDS WITH THIRD PARTY BANKS

We refer to the Terms of Business between the Credit Union and Cantor Fitzgerald Ireland Limited ("CFIL"). We are aware these Terms of Business include the terms of business applicable to the safekeeping of our assets by Pershing Securities international Limited ("PSIL").

We have been advised by CFIL that PSIL is regulated by the Central Bank of Ireland ("CBI"). We understand that in accordance with the rules and requirements of the CBI, and in order to support the holding of these deposits in custody in a sub-pool of client funds (as set out below) PSIL require confirmation in writing where a Credit Union wishes to direct client funds into specific banks and/or products offered by such a bank (such as the fixed term deposits/bonds referred to in this letter).

We understand that for each deposit/bond we will be required to complete an application form or other form of instruction and provide the original form to CFIL. PSIL will receive a copy of this form signed by us from CFIL.

We agree and acknowledge, that by filling in and signing such an application form or form of instruction to CFIL specifying the bank concerned, the product and the amount we wish to deposit, CFIL shall instruct PSIL accordingly and PSIL will treat such form together with the instructions from CFIL as a specific direction from you to take the necessary actions and implement our instructions as conveyed to PSIL by CFIL.

We also confirm that we understand that:

**ACKNOWLEDGED AND AGREED:** 

- (i) PSIL was not involved in the process of choosing the bank or the product we are applying for and is not providing any advice in relation to such deposit;
- (ii) PSIL will be following our instructions in this regard;
- (iii) we understand that the banks used to hold such deposits might not otherwise be used by PSIL to place client funds or the deposit of such funds in accordance with our instructions would increase the amount of PSIL client funds deposited at such bank beyond the amount PSIL would otherwise choose to deposit there;
- (iv) Due to the directed nature of our investment in these deposits, PSIL will hold the funds held for these deposits in a separate client funds sub pool on its records. The holding of the funds in a distinct sub-pool is intended to avoid an impact on PSIL's other end clients in the event that one of the banks where the deposits are held in is in default.

Name of Credit Union:		
Authorised Signatory:		
Name of signatory:	Position:	

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## Tax Exemption Application Form for Non-Residents

Autocertificazione per la non applicazione delle imposte nei confronti dei soggetti non residenti Section I BENEFICIAL OWNER (for institutional investors, see point 17 to 19 and point 29 to 30 of the instruction) Sezione I BENEFICIARIO EFFETTIVO (relativamente agli investitori istituzionali si vedano i punti da 17 a 19 e da 29 a 30 delle Cod. (1) / Cod. (1) Full Name or Company Name (2) / Cognome e Nome o Denominazione - Ragione Sociale (2) Managing Company Name (only for institutional investors not subject to tax) / Nome del soggetto gestore (solo per gli investitori istituzionali privi di soggettività tributaria) Select code Date of Birth / Data di nascita 4 City of Birth / Città di nascita Country of Birth / Stato di nascita 6 Identification Number (see point 13.1 of the instruction) | Codice identificativo (si veda punto13.1 delle istruzioni [7] 8 Select code Full Address / Indirizzo completo estero Postal Code / Codice postale 10 City / Città Country / Stato 12 Country Code(4) / Codice Stato(4) 13 LEGAL or VOLUNTARY REPRESENTATIVE (for institutional investors, see point 17 to 19 and point 29 to 30 of the instruction) RAPPRESENTANTE LEGALE o VOLONTARIO (relativamente agli investitori istituzionali si vedano i punti da 17 a 19 e da 29 a 30 delle istruzioni) Full Name / Cognome e Nome (5) 14 Date of Birth / Data di nascita City of Birth / Città di nascita Country of Birth / Stato di nascita 15 16 17 Identification Number (see point 13.1 of the instruction) / Codice identificativo (si veda punto 13.1 delle istruzioni 18 Cod. (3) / Cod. (3) 19 Select code Full Address / Indirizzo completo estero Postal Code / Codice postale 21 20 Country Code / Codice Stato 24 City / Città Country / Stato 22 23 DECLARATION-REQUEST OF THE BENEFICIARY OR THE LEGAL OF VOLUNTARY REPRESENTATIVE DICHIARAZIONE DEL BENEFICIARIO O DEL RAPPRESENTANTE LEGALE O VOLONTARIO Il sottoscritto ......( nome della persona indicata al punto 2 o 14) **DECLARES:** DICHIARA: **25b** That the name indicated in field 2 of this application is: the beneficial owner of the tax-exempted income or a foreign institutional investor, not subject to tax (if you tick this box, you have also to fill in Section III; otherwise, the tax exemption will not be granted) Is resident/established in the Country indicated in field 12 of this application; Is not resident/established in Italy according to art. 2 and art. 73 of Italian consolidated tax act, approved by Presidential Decree 22 December 1986, nr. 917 Che il soggetto indicato al punto 2 della presente autocertificazione è: l'effettivo beneficiario dei proventi da non assoggettare ad imposta oppure un investitore istituzionale estero, privo di soggettività tributaria (in questo caso, compilare anche la Sezione III; <u>altrimenti, l'esenzione non sarà ammessa</u>) e che E' residente/costituito nello Stato indicato al punto 12 della presente autocertificazione; Non è residente/costituto in Italia ai sensi dell'art. 2 e dell'art. 73 del TUIR approvato con D.P.R. 22 dicembre 1986, n. 917. That the information contained herein is true and that he (it) commits himself to communicate any new circumstances that may impede the application of the tax exemption. Che tutte le informazioni contenute nella presente autocertificazione sono vere e che comunicherà immediatamente ogni nuova circostanza che osti alla non applicazione dell'imposta. 25c

(1) Enter here: 1 for individual; 2 for limited company; 3 for partnership; 4 for other entities. Indicare: 1 se persona fisica; 2 se società di capitali; 3 se società di persone; 4 se altri soggetti.

Signed / Firma.....

(2) For institutional investors not subject to tax as defined in the instruction point 19, enter here the name of the institutional investor. See also point 18. Nel caso di investitori istituzionali privi di soggettività tributaria- così come definiti al punto 19 delle istruzioni, indicare il nome dell'organismo di investimento. Si veda inoltre il punto 18.

### (3) Enter here:

- 1 if the identification number has been issued by the Tax Authority in the country of residence;
- 2 if the identification number has been issued by an Administrative Authority in the country of residence;
- 3 if the identification number has been specifically attributed for the avoidance of withholding tax by the Tax Authority in the country of

Date /Data.....

4 if the identification number has been specifically attributed for the avoidance of withholding tax by an Administrative Authority in the country of residence.

Indicare:

I se il codice identificativo è stato rilasciato dall'Autorità fiscale del Paese di residenza;

DECLARATION OF FIRST PARK

- 2 se il codice identificativo è stato rilasciato da una Autorità amministrativa del Paese di residenza; 3 se il codice identificativo è stato appositamente attribuito ai fini della non applicazione dell'imposta sostitutiva dall'Autorità fiscale del Paese
- 4 se il codice identificativo è stato appositamente attribuito ai fini della non applicazione dell'imposta sostitutiva dall'Autorità amministrativa del Paese di residenza.

  (4) This section must be completed by the 1st or 2nd level bank, if any.

  A cura della banca di primo o secondo livello, a seconda dei casi.
- (5) This field must be completed with the name of the legal representative of the managing company if field nr. 3 has been completed.

Gli investitori istituzionali privi di soggettività tributaria devono indicare in questo campo il nome del rappresentante legale o volontario del soggetto gestore indicato al punto 3 della presente autocertificazione.

	tion II	DICHIARAZIONE DELLA BAN				
Na	me of the First Le	vel Bank / Nome della Banca di Primo Livello				26
Do	micile (address) / I	Oomicilio (indirizzo)	27	City / Città		28
SW	/IFT CODE / COL	ICE SWIFT 29	Country / Paese	30	Postal Code / Codice Postale	31
re Si pe	We hereby certify that the beneficial owner, mentioned in Section I, holds Italian securities in custody with the second level bank, paying interest which the final beneficiary receives and that all the declarations contained in the present form, made by the final beneficiary / his legal representative are true, according to the best of our knowledge. Si attesta che il beneficiario indicato nella Sezione I possiede i titoli italiani depositati presso la banca di secondo livello dai quali derivano i proventi che il beneficiario percepisce e che le dichiarazioni contenute nel presente modello, rilasciate dal beneficiario stesso o dal suo rappresentante, sono esatte secondo quanto consta a questo Ente medesimo.					
re Si	We assume the responsibility to provide the second level bank with all the information, concerning all movements of the above mentioned securities, as required to verify that the final beneficiary indicated in section I is the true owner of the securities.  Si assume l'impegno a fornire alla banca di secondo livello, con riferimento ad ogni operazione di movimentazione dei predetti titoli, le informazioni necessarie per verificare l'appartenenza dei titoli stessi all'effettivo beneficiario indicato nella Sezione I.					
be Si li	We assume the responsibility to provide the second level bank with a banker's affidavit for every additional intermediary present between the first level bank and the final beneficiary and with any information required to avoid withholding tax and in order to make every communication available to the Italian Tax Authorities. Si assume l'impegno a fornire alla banca di secondo livello gli affidavit per ciascuno degli intermediari che si interpongono tra il beneficiario e la banca di primo livello, nonché gli elementi informativi necessari per la non applicazione dell'imposta sostitutiva e per le conseguenti comunicazioni all'Amministrazione fiscale italiana.					
		will be sent to the second level bank, within 15 days o verrà inoltrato alla banca di secondo livello entr				
D	ate / <i>Data</i>		Signed and stamped / Firmato e timbr	ato:	3	32
Se	zione III	ADDITONAL DECLARATION BY TH	E BENEFICIARY OR THE LEGAL	OR VOLUNTARY	REPRESENTATIVE	
Th Il s DI	sottoscritto ECLARES (tick	DICHIARAZIONE SUPPLEMENTARE  only one box) 34 ssegnare una sola casella)	(name of the person indicated in point	2 or 14) <b>33</b>	ALE O VOLONTARIO	
	that the entity	whose name is indicated in field 2 of the self-declara-	ation is a foreign institutional investor, subject	to supervision in the cou	ntry in which it was founded.	
	which it was for it possesses it has not be	whose name is indicated in field 2 of the self-declar nunded, and that: specific competence and experience in transactions en set up for the purpose of managing investments of f Italian Ministry of Finance, issued in accordance	on financial instruments; of a limited number of participants that are resi	dent in Italy and/or in co	untries and territories identific	ed
		whose name is indicated in field 2 of the self-declarately for the purpose of managing the investments of				
	che il soggetto costituito.	indicato al punto 2 della presente autocertificazion	ne è un investitore istituzionale estero, soggett	o a forme di vigilanza ne	el paese estero nel quale è	
	_					
		indicato al punto 2 della presente autocertificazio ership, istituito per una gestione esclusiva a favore				trust
D	ate / Data		Signed / Firmato			35

# **BENEFICIAL OWNERSHIP DECLARATION**

Account Number:	
Full Name:	
Tax Identification Number:	
Address:	
Country:	
The undersigned DECLARES:	
	d above is: the beneficial owner of the tax-exempted income and is  (Country);
That the information contained immediately.	herein is true and any new circumstances will be advised of
Name of Authorised Signatory(i	es):
Title of Authorised Signatory(ies	5):
Authorised Signature(s):	
Please provide an authorised sig	gnatory list to accompany this document.
Date:	



# CLIENT ASSETS KEY INFORMATION DOCUMENT

### 1. Introduction

As you are aware when Cantor Fitzgerald Ireland Ltd ("CFIL" or the "firm") provides investments services to you as our client under our terms of business, we have regulatory responsibility over client assets (both funds and financial instruments) in your account with us.

# 2. An explanation of the Regulations

The manner in which we handle your assets is governed by Part 6 of the Client Asset Requirements, Central Bank (Supervision and Enforcement) Act 2013 (Section 48(1)) (Investment Firms) Regulations 2017 (SI 604 of 2017) and Schedule 3 Safeguarding Client Financial Instruments and Funds, EU MiFIR 2017. In addition, the CBI has issued guidance on the implementation of the Regulations. These documents can be found on the CBI Website at the following web address:

https://www.centralbank.ie/regulation/industry-market-sectors/client-assets

The regulations requires CFIL to provide you with a Client Assets Key Information Document ("CAKID") with the below objectives:

- Explain the key features of the regulatory regime that applies to the safeguarding of client assets;
- Explain what constitutes client assets under that regime
- Explain the circumstances in which that regime applies and does not apply,
- Explain the circumstances in which the investment firm will hold client assets itself, deposit client assets with a third party and deposit client assets with a third party outside the State,
- Explain the arrangements applying to the holding of client assets and the relevant risks associated with these arrangements.

Please read this document in conjunction with the firm's terms of business.

# **Key Principles of the Client Asset Regulations**

The purpose of the Regulations is to regulate and safeguard the handling of client assets to enable swift and safe return of these assets to the clients. However, it is important to note that it can never fully eliminate all risks relating to client assets some of which are identified in Section 5 below.

The key principles of these Regulations require that:

- client assets are segregated from the firm's own assets through registration of client assets in designated client asset accounts with the relevant institution holding the assets;
- all client assets are clearly identified in internals records and identifiable from the firm's own assets;
- we ensure the accuracy of both our records and those of the institutions holding the assets through regular reconciliations and daily calculations;
- we inform you through our terms of business and the CAKID of our arrangements and where relevant obtain your consent to the manner in which your assets are held;
- CFIL have appropriate risk management processes and systems, including documented policies and procedures to ensure that a risk based approach is adopted in safeguarding your assets.

# 3. An explanation of what constitutes client assets under the Regulations

### Client Assets include both

- (i) Client Funds: Any money, to which you are beneficially entitled, which we have received from you or on your behalf. It includes cash, cheques or other payable orders, current and deposit accounts including pledged accounts you may have.
- (ii) Client Financial Instruments: Any financial instrument (for example, shares, bonds and units held in collective investment schemes) held by us on your behalf including any held with a nominee.

The values assigned to your investments are not covered by these Regulations.



# 4. The circumstances in which the Regulations apply and do not apply

Client assets cease to be client assets where:

- a) they are paid, or transferred, to the client whether directly or into an account with a third party or a relevant party in the name of the client (not being an account which is also in the name of the investment firm); or
- b) where they are paid, or transferred, to a third party on the written instructions of the client and are no longer under the control of CFIL. In addition, acting in accordance with the terms of an investment management agreement or the completion of an order or application form will be considered to be a request from the client to pay the client assets to the relevant third party.

It is important to note that the Client Asset Regulations:

### Do apply:

- For funds or financial instruments that have been received in respect of activities which are regulated financial services.
- (ii) Once a cheque or other payable order is received by the firm except where it is payable to a third party and transmitted by CFIL to that party.
- (iii) Once interest is received where it has been agreed in writing that it is payable on your client funds.
- (iv) Until a cheque sent to you by us has been cashed.

### Do not apply:

- (i) When funds or financial instruments have been received in respect of activities which are not regulated financial services.
- (ii) Where you have transferred full ownership of funds or financial instruments to cover or secure present or future, actual or contingent or prospective obligations.
- (iii) Where we receive a cheque or other payable order from you or on your behalf payable to a third party and we transmit that to the third party.
- (iv) Funds that are due and payable to the firm in accordance with our terms of business.
- (v) Where a cheque or other payable order received from you on your behalf is not honoured by the bank.
- (vi) Where funds have been paid to you or a nominated third party (within the limited circumstances such instructions can be undertaken). Please note that payments to third parties can only be done on written instruction from you. Completion of an order or application form is considered a request to pay a third party.

- (vii) Where financial instruments are registered in your own name and we are not providing safe custody.
- 5. An explanation of the circumstances in which the firm will hold clients assets, hold client assets with a third party and hold client assets in another jurisdiction

Client Assets are never held directly by CFIL except where they have been received as part of the settlement process or held while in transit to the client or custodian. CFIL may hold physical assets for up to 10 days on limit orders. These assets are securely stored on CFIL premises and reconciled daily.

Cantor Fitzgerald have entered into an agreement ("the Pershing Agreement") with Pershing Securities International Limited ("PSIL", "Custodian")), Riverside Two, Sir John Rogerson's Quay, Grand Canal Dock, Dublin 2, D02 KV60, www.pershing.ie on behalf of ourselves and each of our clients whereby PSIL has agreed to provide clearing and settlement, safe custody, and other associated services for clients whom Cantor introduces to them. PSIL are regulated by the Central Bank of Ireland and are bound by the Client Asset Regulations.

All client asset accounts are clearly designated as "Client Asset Accounts" in both the internal records of PSIL and the records of any of the institutions actually holding the assets.

Those assets must be identifiable from ours or PSIL's own assets.

### 5.1 Client Funds:

Funds received are lodged to a pooled Client Asset Account with an eligible bank or credit institution. This means that a number of client's funds are held in the same client asset account with the bank or credit institution. However PSIL maintain detailed records identifying the amount being held for each client within the pooled account. We refer to section 5 regarding the risks associated with pooled accounts.

The funds are lodged to an account in the same currency as they are received unless PSIL do not have a client asset account in that currency and it would be unduly burdensome to open one. Amounts are converted at the rates prevailing when lodged to the Client Asset Account.

Where funds are received which include funds not qualifying as Client Funds the total funds are lodged to PSIL's client funds account but an immediate transfer is made of portion not deemed client funds to a non-client asset account.

Our preference is to receive funds by way of electronic transfer from clients. To facilitate this, details of PSIL's client asset bank account is provided to you.



### **5.2 Client Financial Instruments**

Where you have elected to use the safe custody services of PSIL, you consent that your investments will not be registered in your own name. Documents of title to your investments shall be held in physical or dematerialised form by PSIL or an Eligible Third Party.

Your investments will be held in a safe custody account designated as a client asset account and will be registered either in the name of

- (i) A nominee company owned by PSIL,
- (ii) A member of PSIL's group,
- (iii) An exchange which is a regulated market, or
- (iv) An Eligible Third Party, in accordance with the CBOI Client Assets Requirements. PSIL will exercise due skill, care and diligence in the selection, appointment and periodic review of any Eligible Third Party and the arrangements for holding and safekeeping of your investments, but PSIL shall not be responsible for any acts, omissions or default of any such Eligible Third Party save where such a default is caused by fraud, wilful default or negligence on the part of PSIL or its nominee company.

In some instances, due to the characteristics of a particular financial instrument it is not possible for PSIL to hold the assets within the Irish jurisdiction. In such cases they will be held with a custodian in the relevant jurisdiction. It is important to note that where assets are held outside this jurisdiction:

- (i) The Client Assets Regulations applicable may differ to those applicable within this state.
- (ii) The Investment Compensation scheme in operation in Ireland will not apply to any default by the foreign custodian.

PSIL hold client assets on a pooled nominee basis. Under this structure, the share register of the companies in which the underlying investors hold shares (investment companies) will show one entry for the nominee company. This entry will be the aggregate of all the individual investors' holdings. We refer to section 5 regarding the risks associated with pooled accounts and where assets are held outside Ireland or the European Economic Area (EEA) as described above.

PSIL are obliged to keep a detailed breakdown of each individual investor's holding. The total of these holdings must equate to the aggregate on the investment company register.

The firm does not provide safe custody arrangements for the holding of share certificates in client's own names. Where the firm receives share certificates either from clients or on behalf of clients as a result of share transactions the firm immediately passes them to the client or relevant settlement

agent. In such cases the firm maintains a log of all receipts and dispatch of share certificates.

# 6. The arrangements applying to the holding of client assets and the relevant risks associated with these arrangements

Your assets are held by PSIL in a specifically designated Client Assets Account within the institutions outlined above.

Transactions in respect of your assets may only be undertaken by the institution based on an instruction from Cantor Fitzgerald. The principal risks associated with holding your assets in this manner include exposures relating to:

- Loss of financial instrument and /or client funds (The Assets):- the risk that those charged with safeguarding client assets fail to ensure clients assets are only released when authorized by the fund manager or agent on behalf of the underlying investor.
- Administrative risk:- the risk that due to administrative errors, accurate records are not maintained detailing correct shareholdings of the underlying investors.
- Default Risk:- the risk that the owner of the nominee company goes into liquidation or the custodian goes into liquidation.
- Corporate Actions Risk:- the risk that corporate actions are missed by the custodians.
- Negligence or the perpetuation of a fraud by persons employed by either this firm or the institution holding the assets
- Misappropriation of your assets.
- Risks associated with pooled accounts: Under a pooled arrangement, client assets are held along with investments belonging to other clients. The risks associated with this arrangement are: a) This involves a possibility where assets held for one client are temporarily used to meet the settlement obligations of another client; b) In the event of an irreconcilable shortfall, clients may not receive their full entitlement and may share in the shortfall in proportion to their original share, or on some other basis in accordance with the applicable law; c) When your investments are pooled, you may not receive the same treatment or options when there is a corporate action or other event as you would if the investment were held in a separately designated account with a nominee company or custodian, or held in your own name. For example, following an allocation or share issue that favours the small investor, your allocation may be less than it otherwise would have been



if your investments had been registered in your own name.

- Risks associated with investments held by subcustodians outside Ireland or the EEA: Investing in overseas securities may give rise to different settlement, legal and regulatory requirements from those in Ireland or the EEA and different practices for the separate identification of investments. This means that your protection may be less should a default occur on the part of the custodian or sub-custodian. In certain jurisdictions where different laws/regulations apply, your investments will not necessarily be separately identifiable and may be subject to third party claims made against the relevant custodian or sub-custodian.
- "Un-invested money" (i.e. money not immediately required to settle an investment transaction) will not attract credit interest but may attract cash handling charges. Negative cash balances on your account may attract debit interest.

Cantor Fitzgerald endeavour to minimise these risks by confirming PSIL:

- Undertake risk assessments, as set out below, of institutions with whom your assets are held.
- Have written confirmation, in line with the Regulations, from these institutions that your assets will be segregated from the firm's own assets and will be held in separately designated Client Asset Accounts.
- Undertaking regular reconciliations of their records with those of the institutions and following up any differences in a timely manner.

- Undertaking daily calculations of the client money held for clients as per their records with the client money resource that should be held with the bank or credit institution.
- Ensuring instructions on your account are passed to the institutions by appropriately authorised members of staff.
- Ensuring financial instruments are registered and designated as outlined above.
- Ensuring adequate oversight of your assets is maintained by them through appropriate documented procedures and controls to minimise the risk of loss for clients.

PSIL in selecting relevant institutions to hold client assets on behalf of this firm's clients undertake an assessment, at least biannually, covering: The institution's credit rating (where available)

- (i) Known service levels for the institution (where we have past experience with the institution)
- (ii) Whether the institution is independent of the firm.
- (iii) What clients rights would be in the event of insolvency of the institution.

Where the institution is not in the jurisdiction a similar assessment is undertaken. Particular attention is paid to the establishing the relevant guidelines and compensation scheme.

Once an institution has been selected to hold Client Assets a facilities letter confirming specified details, as set out in the Regulations, will be obtained from the institution. No Client Assets will be lodged prior to receipt of the facilities letter.

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