

## Discretionary Managed Service

### Charity/Not for Profit - Trust, Incorporated Charity, or Unincorporated Association Account Application Form

**NEW CLIENT:** Please complete ALL sections.

**EXISTING CLIENT:** Please include your account reference. If any details have changed since you last completed this form including contact details, please complete the form in full.

**In order to establish and operate your account with us, we would ask you to please:**

1. Complete the enclosed Application Form and provide the requested additional documents. For your convenience, we have attached a checklist below. Please contact your Cantor Relationship Manager for clarification or assistance if you are unsure. You may also wish to obtain independent advice prior to completing the form.
2. Consider your answers carefully. In providing a discretionary managed service, we naturally rely on the information you provide us.
3. Undertake a short questionnaire via email (or via a telephone call with our Client Services team) when you complete this form.
4. Once you receive your client account number, please transfer funds electronically in advance of any purchase to our custodian Pershing Securities International Limited, quoting your Cantor client account number.

#### Euro Bank Details

**Bank Name:** Barclays Bank Ireland  
**Account Name:** Pershing Securities International Limited Client Asset Account – Hub Account  
**Sort Code:** 990212  
**Account No:** 45525315  
**BIC:** BARCIE2D  
**IBAN:** IE10BARC99021245525315  
**Reference:** Client Name and Cantor Client Account Number (starting with DS)

**Please note that unfortunately any monies sent without your Cantor client account number will have to be returned to you.**

**Queries/Advice** Call your Financial Advisor or your Cantor Fitzgerald Relationship 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](mailto:ireland@cantor.com)

**Post/Delivery** Return the completed application and required documentation to:  
Cantor Fitzgerald Ireland Ltd, Cantor Fitzgerald House, 23 St Stephen's Green, Dublin 2, D02 AR55

**PLEASE COMPLETE INCORPORATED CHARITY ACCOUNT SET UP CHECKLIST:**

To Be Completed By The Client

1. Please enclose the following (Documents must be certified if the entity is NON Irish):

- A. Copy of the latest Audited Accounts
- B. Copy of Constitutional Documents
- C. Copy of Certificate of Incorporation
- D. Copy of the Company's register of shareholders/members\*\*

\*\*If any of the shareholders/members with 25% or more holding is a corporate entity, please provide the certificate of incorporation, constitutional documents for this entity including a company structure chart showing the ultimate beneficial owners.

- E. Certified copy\* of registered office address – **MUST** be a bank statement that matches the IBAN provided on the application form
- F. (i) Certified copy\* ID (Passport/Drivers Licence) - please ensure it is in date.  
(ii) Two certified copies\* or two originals of the bills listed below issued in the last 6 months and with the same address as noted on the application. (Only one proof of address is required if you have met with your consultant).
  - Gas, electricity, phone or motor insurance certificate/home insurance certificate/tax certificate
  - Bank statement from any Irish Bank
  - Social insurance document or Revenue Commissioners document

\*Must be stamped and certified to be a true copy of the original by Garda, Solicitor or Cantor member of staff

- For Two Directors
- For All Authorised Persons
- For Each of ultimate beneficial owner(s) who have 25% or more shares or voting rights of the company (Anyone noted on the Register of Beneficial Ownership)

2.  Client Taxation Document

**PLEASE COMPLETE TRUST/UNINCORPORATED ASSOCIATION CHARITY ACCOUNT SET UP CHECKLIST:**

To Be Completed By The Client

1. If a Trust please enclose the following:

- A. Certified copy of Trust Deed
- B. Certified copy of Trustee Beneficial Ownership Register which includes details of Settlor, Protector, Trustee and Beneficial Owners
- C. (i) Certified copy\* ID (Passport/Drivers Licence) - please ensure it is in date.
- (ii) Two certified copies\* or two originals of the bills listed below issued in the last 6 months and with the same address as noted on the application. (Only one proof of address is required if you have met with your consultant).
- Gas, electricity, phone or motor insurance certificate/home insurance certificate/tax certificate
  - Bank statement from any Irish Bank
  - Social insurance document or Revenue Commissioners document
- For All Trustees
- For All Settlers
- For All Protectors
- For All Authorised Persons
- For all Beneficial Owners
- D. Certified copy\* of bank statement that matches the IBAN and entity name provided on the application form.

2. If an Unincorporated Association please enclose the following:

- A. Certified copy of Constitutional Document
- B. (i) Certified copy\* ID (Passport/Drivers Licence) - please ensure it is in date.
- (ii) Two certified copies\* or two originals of the bills listed below issued in the last 6 months and with the same address as noted on the application. (Only one proof of address is required if you have met with your consultant).
- Gas, electricity, phone or motor insurance certificate/home insurance certificate/tax certificate
  - Bank statement from any Irish Bank
  - Social insurance document or Revenue Commissioners document
- \*Must be stamped and certified to be a true copy of the original by Garda, Solicitor or Cantor member of staff
- For All Trustees
- For All Authorised Persons
- For All Beneficial Owners (Anyone noted on the Register of Beneficial Ownership)

- C. Certified copy\* of bank statement that matches the IBAN and entity name provided on the application form.

3.  Client Taxation Document

\*Must be stamped and certified to be a true copy of the original by Garda, Solicitor or Cantor member of staff

# Discretionary Managed Service

Charity/Not for Profit - Trust, Incorporated Charity, or  
Unincorporated Association Account Application Form



Please indicate below:

1.  Retail  
 Professional
2.  Trust  
 Incorporated Charity  
 Unincorporated Association Charity

## Section 1: Account Details

### Entity Details (PLEASE USE BLOCK CAPITALS)

Legal Entity Name	<input type="text"/>		
Registered Address	<input type="text"/>		<input type="text"/>
	Country:		
Principal Address	<input type="text"/>		<input type="text"/>
	Country:		
Tel:	<input type="text"/>	Charity No.	<input type="text"/>
Country of Incorporation/Establishment	<input type="text"/>	Charities Regulatory Authority No.	<input type="text"/>
LEI Code (Legal Entity Identifier)	<input type="text"/>	Company No. (if applicable)	<input type="text"/>

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## Section 2: Financial Information and Financial Objectives

### Financial Information and Objectives To Be Completed By The Client (PLEASE USE BLOCK CAPITALS)

#### Annual Income/Expenditure

Please provide best estimates for the required information below and please complete all sections. Please note that all detail is required for consideration of the provision of the Client's discretionary service and the suitability of the resulting portfolios. Any answer not provided will be assumed to be zero:

##### Income/Expenditure\*

Annual Expenditure	€	<input type="text"/>
Annual Income	€	<input type="text"/>
Comprising		
Charitable Donations	€	<input type="text"/>
Rental Income	€	<input type="text"/>
Investment Income	€	<input type="text"/>
Other	€	<input type="text"/>
Net Annual Income	€	<input type="text"/>

\*per most recent Financial Statements

##### Balance Sheet\*

Property	€	<input type="text"/>
Investments other than property	€	<input type="text"/>
Cash	€	<input type="text"/>
Liabilities (Net)	€	<input type="text"/>
Net Assets	€	<input type="text"/>

#### Portfolio Size

What is the Client's approximate anticipated total portfolio size

Please state the approximate annual income requirement, if any, from your investment with Cantor

#### Source of Wealth/Funds

(i) Please indicate how the Client's **overall wealth** was accumulated. You can indicate more than one option.

Please Tick

- Charitable Donations
- Property Sales
- Rental Income
- Other Investment Returns
- Other (please specify)

(ii) Please indicate the source of your **initial transfer to Cantor**. You can indicate more than one option.

Please Tick

- Bank Deposit Account
- Proceeds of Asset Sale(s)
- Transfer from another Investment Provider
- Transfer from Cantor Advisory Account
- Other (please specify)

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## Section 3: Experience

### Knowledge & Experience Relevant to the Decision Maker\* (PLEASE USE BLOCK CAPITALS).

Please indicate in what capacity or service level you gained any knowledge and experience in financial markets:

(You can select more than one option if applicable)

- Execution Only:** You made all the decisions without professional advice; only market information and updates
- Advisory:** You made all the decisions with the benefit of advice from a financial advisor
- Discretionary:** You agreed account parameters and allowed an investment advisor to make decisions on your behalf without reverting to you

Please indicate your investment experience in relation to the following Financial Instruments:

**None:** You have no knowledge or experience investing in financial markets.

**Limited:** You have some knowledge and experience of financial markets but limited actual trading history.

**Good:** You have reasonable knowledge and experience of financial markets and have traded over a number of years.

**Extensive:** You have good knowledge and experience and have traded consistently over the last number of years.

FINANCIAL INSTRUMENTS	KNOWLEDGE				EXPERIENCE	
	NONE	LIMITED	GOOD	EXTENSIVE	EXPERIENCE (No of Years)	TYPICAL NUMBER OF TRADES PER ANNUM
Equities	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Corporate Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Government Bonds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Investment Funds	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Structured Products	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Corporate Finance/ Unquoted Investments	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Derivatives (CFD's, Options, Futures)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
Illiquid Investments (Cannot be easily accessed and/or not traded on an exchange)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

If you have indicated Limited/Good/Extensive Knowledge and Experience but have no history of transacting, please indicate how you have attained this knowledge/attained your years experience?

#### Investment Committee: Professional Qualifications or Experience

1. Does the Client have an advisory investment committee? Yes  No

2. Do you have a relevant professional qualification? Yes  No

If yes, please list qualification(s)

3. Do you work as an investment manager/advisor? 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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## Section 4: Investment Objectives

### Investment Objectives & Restrictions

#### A. What is your investment time horizon?

- 1 - 3 years
- 3 - 5 years
- 5 - 10 years
- 10 - 15 years
- 15 - 20 years
- 20+ years

#### B. Which of the following best describes your investment objective

- Capital Growth only
- Mix of Income with Capital Growth
- Income only
- Capital Preservation

### Further Objectives & Restrictions (PLEASE USE BLOCK CAPITALS)

Please consider your answers carefully as this will allow us to tailor your portfolio to your specific Sustainability Preferences where available. Please note that if you do not have any sustainability preferences, you do not need to answer the remaining questions.

#### 1. Do you have sustainability preferences for your investments?

- No, I am only interested in the financial aspects of the investment. (No further answers are required)
- I don't know. I would need to give sustainability preferences more consideration. (Please consult with your Cantor Relationship Manager or Financial Advisor)
- Yes, I am interested in the sustainability attributes as well as the financial aspects of investments (Please proceed to Questions 2 – 4)

#### 2. To what minimum extent do you want Environmentally Sustainable investments (i.e. make a substantial contribution towards an environmental objective) to form part of our recommendations to you and therefore your portfolio?

Generally speaking, for a business or business activity or product to be considered environmentally sustainable, it must:

- Contribute substantially to one or more of certain specified environmental objectives;
- Not significantly harm any of those environmental objectives
- Be carried out in compliance with certain minimum social safeguards; and
- Comply with technical screening criteria established by the EU Commission (the 'EU Taxonomy')

Please choose a percentage band:  0 - 25%  Minimum 26%  Minimum 51%  Minimum 76%

#### 3. To what minimum extent do you want Sustainable Investments to form part of our recommendations to you and therefore your portfolio?

By Sustainable Investments we mean an investment in business that contributes to an environmental and/or social objective. This objective should be measurable, for example, a key resource efficiency indicator on the use of energy, renewable energy, raw materials, water and land, on the production of waste, and greenhouse gas emissions. It could measure the impact on biodiversity and the circular economy. It could be an investment in a business that contributes to a social objective, for example tackling inequality or that fosters social cohesion, social integration and labour relations, or an investment in human capital or economically or socially disadvantaged communities. This is provided that such investments do not significantly harm any of those objectives and that the investee companies follow good governance practices, in particular with respect to sound management structures, employee relations, remuneration of staff and tax compliance.

Please choose a percentage band:  0 - 25%  Minimum 26%  Minimum 51%  Minimum 76%

Please continue to next page

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## Further Objectives & Restrictions continued

### 4. To what extent are the below grouped Principal Adverse Impact important to you?

A Principal Adverse Impact (PAI) is the impact of your investment decision; by reference to the business activity of or the actual entity which issues the security which you purchase. A PAI refers to the negative effect on sustainability factors, such as environmental, social and employee concerns, respect for human rights, anti-corruption, and anti-bribery matters by an entity in which you invest, by virtue of its direct actions and such effect therefore in part facilitated by your investment.

A. Climate Change	B. Environmental	C. Social And Employee Matters	D. Governance
Greenhouse Gas Emissions	Activities that negatively affect bio-diversity-sensitive areas	Adherence to the UN Global Compact	Respect for Human Rights
Carbon Footprint	Emissions to Water	Unadjusted Gender Pay Gap	Anti-Corruption Matters
Greenhouse Gas Intensity	Hazardous Waste and radioactive waste ratio	Board Gender Diversity	Anti-Bribery Matters
Exposure to Companies active in the fossil fuel sector		Exposure to Controversial Weapons	

#### A. To what extent are Climate Change Principal Adverse Impacts Important to You?

Not Important  Important

#### B. To what extent are Environmental Principal Adverse Impacts Important to You?

Not Important  Important

#### C. To What Extent are Social and Employee Principal Adverse Impacts Important To You?

Not Important  Important

#### D. To What Extent are Governance Principal Adverse Impacts Important To You?

Not Important  Important

**Note: Please notify us as soon as possible of any material change in any information given above.**



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## Section 5: Client Details

### Introduction

1. If there are more than 10 parties please provide details as per below. Please note changes to client details must be provided in writing and Cantor in the interests of protecting the Client retains the right to reject such changes until Cantor is satisfied that correct and valid instructions have been received.
2. A beneficial owner is defined as a person/entity who have 25% or more share holding OR voting rights in the entity.
3. An Authorised Person is an individual authorised to make representation or provide instruction to Cantor - written or oral. Cantor will operate on the instruction of two Authorised Persons.
4. A Correspondent Recipient is assumed to be approved by the entity to receive account correspondence only. Account correspondence is defined as information such as: important account updates, quarterly valuations, etc.
5. Anti-Money Laundering documentation must be provided for Two Directors, all Authorised Persons and all Beneficial Owners.
6. Cantor is committed to protecting your information. Our Privacy Notice which can be accessed at [cantorfitzgerald.ie/privacy](http://cantorfitzgerald.ie/privacy) provides you with detailed information in relation to how the personal data we collect from you, or you provide to us, will be used and how it may be shared.

### A: Corporate Structure To Be Completed By The Client

Is one or more Beneficial Owners of the client itself a corporate structure? Yes  No

If "Yes" please provide a copy of the Corporate ownership structure up to and including the ultimate beneficial owner(s)

### B: Client Details To Be Completed By The Client (PLEASE USE BLOCK CAPITALS)

#### Individual 1

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

#### Individual 2

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

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## B: Client Details continued (PLEASE USE BLOCK CAPITALS)

### Individual 3

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

### Individual 4

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

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## B: Client Details continued (PLEASE USE BLOCK CAPITALS)

### Individual 5

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

### Individual 6

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

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## B: Client Details continued (PLEASE USE BLOCK CAPITALS)

### Individual 7

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

### Individual 8

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

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## B: Client Details continued (PLEASE USE BLOCK CAPITALS)

### Individual 9

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

### Individual 10

Title Mr  Mrs  Ms  Miss  Other

Surname

Forename(s)

Residential Address

Nationality

Email

Tel

Role  Director  Beneficial Owner  
 Authorised Person  
 Correspondence Recipient

#### If Authorised Person

**SIGNATURE**

Position/Title

#### If Beneficial Owner/Guarantor:

% Shareholding/Guarantee

AML Provided  Yes  No

## C: Bank Details (PLEASE USE BLOCK CAPITALS)

Bank Name

Bank Address

Account Name

IBAN\*  BIC

\*IBAN includes account number and sort code and is an international standard for identifying bank accounts across national borders. This is detailed on the bank statement.

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## Section 6: Acceptance and Board/Trustee Resolution

### A: Resolutions of board of directors Only complete for INCORPORATED CHARITY (PLEASE USE BLOCK CAPITALS)

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 and authority and acknowledgements noted

#### 1. Authority to open a Securities dealing account

That an account or accounts be opened with Cantor Fitzgerald Ireland Ltd (Cantor) at 75 Stephen's Green, Dublin 2 based on the Investment Mandate comprising this Account Opening Document, the Terms and Conditions booklet, the Investment Portfolio and Strategy provided by Cantor, the Tax Documentation, the Conflicts of Interest Policy, the Order Execution Policy, Client Asset Key Information Document and the conditions below.

Any two Authorised Persons are approved to execute the Account Opening Document on the client's behalf and the Client has addressed any queries about any aspect of the Investment Mandate to Cantor for clarification and have sought independent advice if they feel appropriate to do so.

The Client confirms the information provided by the nominated decision maker in Section 3 Part A is correct and understands that this is the information that will be used to determine the knowledge and experience of the client.

#### 2. Authority to Cantor

That Cantor be authorised and instructed to undertake the following:

- a. To act in accordance with the agreed Investment Mandate and to act on any instructions from the Authorised Persons as outlined in the Account Opening Document (or as varied from time to time in writing) with regard to the operation of the account in line with the investment mandate.
- b. To honour the following written instructions from Authorised Persons
  - i. Instructions to withdraw any or all money on any account or accounts of the Client with Cantor, subject to sufficient liquidity being available in the underlying investments.
  - ii. Instructions to amend the Investment Mandate.

#### 3. Not to restrict Cantor's right to lien, etc.

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

#### 4. To furnish Cantor with Client Constitution

That Cantor be furnished with an up-to-date copy of the Client Constitution and the Certificate of Incorporation.

#### 5. To provide Client Details, etc.

That the Client Details provided are correct and valid and that Cantor will be notified immediately in writing, signed by an Authorised Person 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 Cantor may continue to treat the last list received as correct.

#### 6. 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 3 Part A for the assessment required.

#### 7. To communicate resolutions to Cantor

That these resolutions shall constitute the Investment Mandate and shall remain in force until an amending instruction as accepted by Cantor or amending resolution as required by Cantor shall be passed by the Client board of Directors and a copy of such resolutions certified by any Director or the Secretary of the Client shall be communicated to Cantor. Cantor shall be entitled to accept a change in the Investment Mandate as notified in writing by two authorised persons.

#### 8. 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.

#### 9. Statements of Account

The Client agrees that it will examine all statements supplied by Cantor setting out transactions on any of its accounts within 30 days of dispatch by Cantor.

#### 10. 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 Client Constitution and are, at this date, in full force and effect.

Please continue to next page

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## A: Resolutions of board of directors Continued

### DIRECTOR'S SIGNATURE

Print Name

Date Signed

  

### DIRECTOR'S SIGNATURE

Print Name

Date Signed

  

## B: Resolutions of the Trustees Only complete for TRUST (PLEASE USE BLOCK CAPITALS)

We certify that at a meeting of the Trustees of \_\_\_\_\_ ("Client"), duly convened and held on the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, the following resolutions were duly passed and authority and acknowledgements noted

### 1. Authority to open a Securities dealing account

That an account or accounts be opened with Cantor Fitzgerald Ireland Ltd (Cantor) at 75 Stephen's Green, Dublin 2 based on the Investment Mandate comprising this Account Opening Document, the Terms and Conditions booklet, the Investment Portfolio and Strategy provided by Cantor, the Tax Documentation, the Conflicts of Interest Policy, the Order Execution Policy, Client Asset Key Information Document and the conditions below.

Any two Authorised Persons are approved to execute the Account Opening Document on the client's behalf and the Client has addressed any queries about any aspect of the Investment Mandate to Cantor for clarification and have sought independent advice if they feel appropriate to do so.

The Client confirms the information provided by the nominated decision maker in Section 3 Part A is correct and understands that this is the information that will be used to determine the knowledge and experience of the client.

### 2. Authority to Cantor

That Cantor be authorised and instructed to undertake the following:

- a. To act in accordance with the agreed Investment Mandate and to act on any instructions from the Authorised Persons as outlined in the Account Opening Document (or as varied from time to time in writing) with regard to the operation of the account in line with the investment mandate.
- b. To honour the following written instructions from Authorised Persons
  - i. Instructions to withdraw any or all money on any account or accounts of the Client with Cantor, subject to sufficient liquidity being available in the underlying investments.
  - ii. Instructions to amend the Investment Mandate.

### 3. Not to restrict Cantor's right to lien, etc.

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

### 4. To furnish Cantor with Constitution/Trust Deed

That Cantor be furnished with an up-to-date copy of the Constitution or Trust Deed and any other governing documents.

### 5. To provide Client Details, etc.

That the Client Details provided are correct and valid and that Cantor will be notified immediately in writing signed by an Authorised Person 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 Cantor may continue to treat the last list received as correct.

### 6. 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 3 Part A for the assessment required.

### 7. To communicate resolutions to Cantor

That these resolutions shall constitute the Investment Mandate and shall remain in force until an amending instruction as accepted by Cantor or amending resolution as required by Cantor shall be passed by the Client Trustees and a copy of such resolutions certified by any Trustee or the Secretary of the Client shall be communicated to Cantor. Cantor shall be entitled to accept a change in the investment mandate as notified in writing by two authorised persons.

Please continue to next page

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## B: Resolutions of the Trustees Continued

### 8. Interpretation

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

### 9. Statements of Account

The Client agrees that it will examine all statements supplied by Cantor setting out transactions on any of its accounts within 30 days of dispatch by Cantor.

### 10. 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 Constitution/Governing Documents and are, at this date, in full force and effect.

#### TRUSTEE SIGNATURE

Print Name

Date Signed

  

#### TRUSTEE SIGNATURE

Print Name

Date Signed

  

## C. Acknowledgement Please complete for all Charity structures

### Authority and Acknowledgements

That Authorised Persons be instructed to:

Sign this document noting that it will constitute a contract, both legally binding and enforceable, acknowledging that they have carefully read and understand the Investment Mandate which they have been presented with and have had an opportunity to consider and which the Client will be bound by including all terms and conditions thereto.

The Authorised Persons acknowledge on behalf of the client that:

(a) I/We have carefully read, acknowledge and understand the terms of the below listed documentation which I/we have been presented with and have had an opportunity to consider. I/We hereby agree that by signing this acknowledgement that I/we will be bound by all terms and conditions contained in the following documents:

Discretionary Terms and Conditions booklet:

- i. Terms and Conditions of Service
- ii. Conflicts of Interest Policy
- iii. Order Execution Policy
- iv. Information on Financial Instruments

(b) The service description set out in the Terms and Conditions booklet incorporates the service to be provided by Cantor to me/us in its entirety, and for which I/we now hereby apply.

(c) The risk profile, investment experience, financial information and restrictions provided in the Account Opening Document is a complete and accurate record of all information relevant and necessary to allow Cantor to provide discretionary service to me.

(d) I/We acknowledge that Cantor will arrange for a nominee account to be opened with Pershing Securities International Limited on my/our behalf.

(e) I/We confirm that the information provided to Cantor in respect of applying the appropriate risk strategy is accurate and undertake to notify Cantor in writing should there be a change in the assumptions used that should lead to a need for a change in the type and nature of investment advice and strategies used upon my/our account.

(f) I/We may place orders on my/our account without direct instruction and that such orders are at Cantor's discretion within the terms of the Investment Mandate.

(g) I/We accept that while Cantor will manage my/our assets prudentially, past performance is not a reliable indicator of future performance. I/We further accept that the value of this account may fall as well as rise and that as the account is invested in equities, extreme events could arise where I/we lose all or part of the value of the account.

Please continue to next page



# Discretionary Managed Service

Charity/Not for Profit - Trust, Incorporated Charity, or  
Unincorporated Association Account Application Form



## C. Acknowledgement continued

- (h) 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.
- (i) I/We have been presented with a current rate card and I/we are aware that any changes to this will be updated to the Cantor Fitzgerald website for my/our reference.
- (j) 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

#### AUTHORISED PERSON

Print Name

Date Signed

  

#### AUTHORISED PERSON

Print Name

Date Signed

  

## D: Receipt and acknowledgement by Cantor Relationship Manager

I have reviewed the application and am satisfied that all necessary information has been provided by the Client and that where explanation is required I have provided a sufficient explanation to the satisfaction of the Client. I am satisfied that the various selections of the Client, based on the information provided are appropriate to the Client's financial experience and risk appetite and suitable for the Client's financial need and position.

Name

Signature

Date

  

**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.

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

### SECTION 1: Entity Details

Entity Legal Name

Registered Address

Country:

### SECTION 2: Declaration of Tax Residency

Name of Entity

Country of Tax Residency(List all)

Tax ID Number (TIN)

If TIN not available, please indicate reason









### SECTION 3: Entity's Classification

Please complete if applicable to your account type, as per the instructions at the start of this form

You are required to choose one CRS classification and one FATCA classification within this section.

You MUST choose one of the below options:

#### FATCA Classification

- Reporting Model 1 FFI
- Reporting Model 2 FFI
- 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:

#### GIIN (if applicable)

  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  
  


If the GIIN provided above is issued in the name of your sponsor, please provide your sponsor's name and sponsor's GIIN

Name of the sponsoring Entity

GIIN number of the sponsoring Entity

(continued on following page)

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

You MUST choose one of the below options:

### CRS Classification

- Financial Institution other than investment entity (custodial institution, depository institution/specified insurance company)
- Financial Institution non-reporting according to local jurisdiction legislation where you are a resident
- Investment Entity with Tax Residence in a non-participating jurisdiction and managed by another FI  
**(also complete Section 4 for Controlling Persons)**
- Passive Non-Financial Entity **(also complete Section 4 for Controlling Persons)**
- Active Non-Financial Entity which is a Government/Central Bank/International 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

You can find further definitions on the different classification on our CRS/FATCA Appendix accessible at [cantorfitzgerald.ie](http://cantorfitzgerald.ie)

### 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

**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.

Controlling Persons type code	Print Name & Signature*	Date of birth (dd/mm/yyyy)	Full residence address	Tax residence country	TIN /if TIN not available please indicate reason

\*By signing you are confirming the information to be accurate and complete.

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

### Controlling Persons Type codes:

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

## SECTION 5: Declaration and Undertakings

- (a) I/We declare that all statements made in this declaration are, to the best of my/our knowledge and belief, correct and complete.
- (b) I/We 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/We certify that I/we am/are the Account Holder (or am/are 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/we understand that I/we am/are 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

#### AUTHORISED PERSON 1

Print Name

Date Signed

  

#### AUTHORISED PERSON 2

Print Name

Date Signed