## **CUSTOMER APPLICATION**

This application shall be sent in original to Nordic Equities Kapitalförvaltning AB, Grev Turegatan 13B, Box 7238, 103 89 Stockholm, SWEDEN, along with the documents specified below. After we have received a complete customer application, we will send you a customer identification number – which shall be used when completing the purchasing form and when transferring payments.

PERSONAL/CORPORATE INFO	RMATION		
Name / Corporation		Person	nal identification no./ Corporate id. number
Address		Postal code	City
Country (if other than Sweden)	Residence for tax purposes (if other tha	n Sweden) Foreign tax ID	
Contact	Telephone (inc. area code)	E-mail address	
ACCOUNT - FOR FUTURE PA	YMENTS		
Bank name	Account number (IBAN) PLEASE NOTE! T	ne account must be registered on t	the holder of fund units. (This apply also to minors.)
GUARDIANS, IN CASE OF MIN	IORS		
Name of guardian		Person	nal identification no. of guardian
Name of guardian		Person	nal identification no. of guardian
REPORTS	C	USTOMER IDENTIFICATION	ON NUMBER
I/we wish to receive the semi-annual		he customer number is sent pecified. Please send my custom	-
certifying the document shall include identification documents and a copy being a guardian – please attach a copy of the properties of the	of the documentation that validates that you by of your own identity documents and a copy of your own identity documents and a copy of the representative is authorized to represent otocol. Fication documents for the signatory. Upon celephone number.	hone number. If you are a guare the guardian of the person. of a written power of attorney, if the legal person, e.g. current regretification, the person certifying that Nordic Equities Kapitalförvalt uts upon financial institutions US taxation. Therefore, we ask	ardian – please attach a copy of your own val If you represent the account of a person withou identity document or equivalent. gistration documentation (no older
2. On whose account is the investmen  My own	t made? Other, please state principal, address and pe	rsonal identification no. or corpo	orate id. no.
	1(4		



Continuation, customer application

3. Where does the money you invest in Nordic Equities' funds come from	m?						
		ments of business		Insurance Other, please specify:	Sale of real estate		
4. What is your investment horizon?							
Short term (<2 years) Medium term (2–5 years)	Long	term (>5 years	)				
5. To what amount do you estimate an average transaction?  <500.000 SEK 500.000-5.000.000 SEK	>5.00	00.000 SEK					
6. How often will you, at a rough estimate, realize transactions in Nordi	c Equi	ties' funds?					
Monthly or more often Several times per year	1 time	e per year		More seldom			
<ul> <li>7. For individuals:</li> <li>Are you, or have you been in an exposed political position during the past 18 months?</li> <li>Among others, the positions listed below are examples of exposed political positions: <ul> <li>Head of State, head of government, minister, deputy minister (or equivalent)</li> <li>Member of parliament/member of a legislature</li> <li>Member of the governing body of a political party</li> <li>Member of a supreme court, constitutional court or other high-level judicial bodies, the decisions of which are not subject to further appeal, except in exceptional circumstances</li> <li>Member of courts of auditors or of the boards of central banks</li> <li>Ambassador, chargés d'affaires and high-ranking officer in the armed forces</li> <li>Member of the administrative, management or supervisory bodies of State-owned enterprises</li> <li>Directors, deputy directors and members of the board or equivalent function of an international organisation (e.g. UN, UN related organizations, Council of Europe, NATO and WTO)</li> </ul> </li> </ul>							
No, I/we am/are not in, and have not been in a political position	lly ex	posed		s, I/we am/are, or have been in a cplain in the table below)	politically exposed position		
Function		<u> </u>	Coun		Period		
8. For Individuals:							
Are any of the following to you close/associated persons in a politically	expos	sed position gi	ven ti	ne definition above?			
<ul> <li>Spouse, brother, sister or by national law equal person</li> <li>Common-law partner</li> </ul>		No No		Yes, explain in the table below Yes, explain in the table below			
- Child, spouse of child or common-law partner of child		No		Yes, explain in the table below			
- Parent		No		Yes, explain in the table below			
- Close business associate		No		Yes, explain in the table below			
Name Relation		Fun	ction	Country	Period		
9. For individuals:  Are you a citizen or resident of the U.S.? Or for other reasons subject to US taxation?  No  Yes, fill in you Tax Identification Number (TIN):							
		2(4)					



	No	Yes	
	1.	Afghanistan	
	2.	Barbados	
	3.	Burkina Faso	
	4.	Cambodia	
	5.	Cayman Islands	
	6.	Democratic People's Republic of Korea	
	7.	Haiti	
	8.	Iran	
	9.	Jamaica Jordan	
		Mali	
		Morocco	
	13.		
		Nicaragua	
		Pakistan	
	16.	Panama	
	17.	Senegal	
	18.	South Sudan	
	19.	Syria	
	20.	Philippines	
	21.	Trinidad and Tobago	
	22.	Uganda	
		Vanuatu	
		Yemen Zimbabwe	
	23.	Ziiiibabwe	
. For	lega	al persons:	
he e	ntity	r.	
	– Re	gistered in the U.S.?	No Yes*
	- A 1	financial institution?1	No Yes*
	– An	n excepted beneficial owner2, or an active non-financial entity3?	No Yes*
		*A compliance of	fficer from Nordic Equities Kapitalförvaltning may contact you for additional information
For	· lens	al persons:	
	lege	persons.	
			25~% as well as natural persons with a controlling influence (beneficial owner). For
		· · · · · · · · · · · · · · · · · · ·	beneficiaries or natural persons in whose interest the foundation has been established
oper	ates		
Name		Address	Personal Share in %
			Identification
N	o on	e possess a share over 25%, or a controlling influence	Charitable foundation, or association
		<u> </u>	
	egal p	person does not have a beneficial owner, we must, according to re	gulations, appoint an alternative beneficial owner. The Fund Company has adopted as
⊣ :he le		consider the chairman of the board as the alternative beneficial or	wner. Please state the name, address, and national identification number of the
	ne to		
	ne to		
	ne to		
outir		tt holds/administers financial assets for the benefit of another entity/person	
n enti	ty tha	ls (according to the law (1967:531)), governmental entities, international organisation	ns and central banks.
n entiension	ity tha n fund ity is o	Is (according to the law (1967:531)), governmental entities, international organisation defined as an active non-financial entity if any of the following is applicable: e than 50% of its gross income for the preceding calendar year came from sales of p	
n entiension	ity than fundity is o	Is (according to the law (1967:531)), governmental entities, international organisation defined as an active non-financial entity if any of the following is applicable: e than 50% of its gross income for the preceding calendar year came from sales of pentity is owned by the government, state or county.	
An enti Pension An ent i) ii)	ity than fundity is o	Is (according to the law (1967:531)), governmental entities, international organisation defined as an active non-financial entity if any of the following is applicable: e than 50% of its gross income for the preceding calendar year came from sales of p	



chairman of the board (if no beneficial owner has been specified in the table above). Please also attach a certified copy of a valid identification document. Upon certification, the person certifying the document shall include signature, full name, and address or telephone number.

Name	National identification number	Country					
Address	Postal code	City					
12. For legal persons or agents:							
Are, or have any of the persons listed above in question 2 or 11 above, beer member or close business associate of such a person?	n in a politically exposed position in the las	t 18 months (see definition above) or a family					
<u></u>	_						
Yes, (describe below)	No						
1							
Name							
SIGNATURES							
I/we declare that the information given here, that is of importance to taxation and the application of legislation relating to reporting obligations etc, is correct, and that I/we undertake to notify Nordic Equities Kapitalförvaltning AB (The Fund Company) promptly of any changes, e.g. moving abroad and changes of names or/and bank accounts. I/we confirm that the Fund Company is entitled to disclose any information I/we have submitted to the company if any authority should so request. The Fund Company will be processing the information I/we have submitted to the extent this is necessary for the performance of the company's obligations, and the information submitted may be disclosed to and processed by other companies associated with the Fund Company, and I/we understand and give our consent to this.							
I/we understand that historical development does not guarantee future return and that the value of fund's units can both rise and fall. Exchange rate fluctuations may result in a rise or fall of the value of units of funds investing in foreign markets. There are no guarantees that an investment will not result in a loss. This applies also when the stock markets otherwise develop in a favourable manner. Each and every person that acquires units in our funds is obliged to make a personal assessment of the investment and the associated risks. Any prospective investor in our funds is obliged to ensure that the investment complies with all applicable laws and regulations, Swedish as well as foreign. The Fund Company is under no obligation to ascertain whether an investment from abroad complies with the laws of the relevant country.							
I/we understand that the Fund Company does not provide financial advice as referred to in the Swedish Financial Advice to Consumers Act [lagen om finansiell rådgivning till konsumenter] (SFS 2003:862), and I/we furthermore confirm that I/we have not instructed Nordic Equities Kapitalförvaltning to provide any such advice.							
I/we furthermore understand that the Fund Company, in accordance with the Money Laundering and Terrorist Financing (Prevention) Act (2017:630) has no obligation to complete trades if a complete Know-Your-Customer (KYC) form has not been received.							
Information about Nordic Equities processing of personal data, please read our	privacy policy at <a href="http://nordeq.se/om-oss/leg">http://nordeq.se/om-oss/leg</a>	al-information/?tab=integritetspolicy.					
Place and Date	Place and Date						
Authorized Signature	Authorized Signature						
Printed Name	Printed Name						

Please attach copies of identification and signatory documents