

IMPORTANT

- INVESTORS SHOULD RETURN THE ORIGINAL APPLICATION FORM BY POST TO THE ADMINISTRATOR AT THE ADDRESS ON THE FOLLOWING PAGE. FAILURE TO RETURN THE ORIGINAL APPLICATION FORM AND SUPPORTING DOCUMENTATION WILL DELAY THE PAYMENT OF REDEMPTION PROCEEDS (AND DIVIDENDS/DISTRIBUTIONS IF APPLICABLE).
- INVESTORS SHOULD ENSURE THE SECTION HEADED "SIGNATURE" ON PAGE 25 HAS BEEN SIGNED BEFORE RETURNING THIS TO THE ADMINISITRATOR.

ADMINISTRATOR

**Northern Trust International Fund Administration Services (Ireland) Limited
George's Court
54-62 Townsend Street
Dublin 2
Ireland**

**Telephone: +44 (0) 333 300 0381
Facsimile: +353 1 531 8537
Email: offshore@woodfordfunds.com**

Please ensure that you have read the Prospectus and the Key Investor Information Document (the "KIID") before completing this Application Form. The KIID is available at the Investment Manager's website woodfordfunds.com/weiff.

Defined terms used in this Application Form are those used in the Prospectus (unless the context otherwise requires).

Your personal information will be handled by the Administrator or its duly appointed delegates as Data Processor for the Fund in accordance with the Irish Data Protection Acts 1988 to 2003 ("Data Protection Legislation"). Your information provided herein will be processed for the purposes of complying with Data Protection Legislation and this may include disclosure to the Irish Revenue Commissioners.

PLEASE COMPLETE THIS APPLICATION FORM IN BLUE OR BLACK INK USING BLOCK CAPITALS.

Shareholders should note that all or part of fees and expenses including management fees may be charged to the capital of the ICAV. This will have the effect of lowering the capital value of your investment.

This Application Form, together with the Money Laundering Verification Requirements and the declaration of Irish Residence outside Ireland, constitutes your agreement to subscribe for Shares in the Fund. You should post or fax this Application Form (in which case the original Application Form and supporting documentation must also be forwarded) to the Administrator at the address on page 02.

Incomplete Application Forms (where compulsory information* has not been provided) may be rejected and subscription monies received may be returned. If an application is rejected, the Administrator at the cost and risk of the Applicant will, subject to any applicable laws, return application monies or the balance thereof, without interest, expenses or compensation by electronic transfer to the account from which it was paid.

INVESTOR TAX RESIDENCY

Please tick the relevant box

A) Non-U.S. Taxpayer

B) U.S. Taxpayer*

C) One or more joint applicants is a U.S. Taxpayer

D) Non-U.S. Taxpayer holding shares on behalf of a U.S. Taxpayer

If B, C or D has been ticked then each U.S. taxpayer must complete and sign IRS Form W-9 to certify their tax identification number. The form can be downloaded from www.irs.com. Failure to submit a completed IRS Form W-9 (where applicable) will result in a delay in the settling of redemption/dividend proceeds (no interest will accrue).

*"U.S. Taxpayer" is defined to include a U.S. citizen or resident alien of the United States (as defined for United States federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organised in, or under the laws of, the United States or any state thereof (including the District of Columbia); any other partnership that is treated as a U.S. Taxpayer under U.S. Treasury Department regulations; any estate, the income of which is subject to U.S. income taxation regardless of source; and any trust over whose administration a court within the United States has primary supervision and all substantial decisions of which are under the control of one or more U.S. fiduciaries. Persons who have lost their U.S. citizenship and who live outside the United States may nonetheless, in some circumstances, be treated as U.S. Taxpayers.

An investor may be a "U.S. Taxpayer" but not a "U.S. Person". For example, an individual who is a U.S. citizen residing outside of the United States is not a "U.S. Person" but is a "U.S. Taxpayer".

U.S. Taxpayers will be required to furnish the Administrator with a properly executed IRS Form W-9. Amounts paid to Shareholders who are U.S. Taxpayers as a distribution from the Fund, or as gross proceeds from a redemption of Shares, will generally be reported to Shareholders who are U.S. Taxpayers and the IRS on an IRS Form 1099 (except as otherwise noted below). Failure to provide an appropriate and properly executed IRS Form W-9 (for Shareholders who are U.S. Taxpayers) may subject such Shareholders to backup withholding tax. Backup withholding tax is not an additional tax. Any amounts withheld may be credited against such Shareholders' U.S. federal income tax liability.

Tax exempt entities, corporations, non-U.S. Shareholders and certain other categories of Shareholders generally will not be subject to reporting on IRS Form 1099 or backup withholding, provided that, in the case of tax exempt entities and corporations, such Shareholders furnish the Administrator with an appropriate and properly executed IRS Form W-9 certifying as to their tax exempt status.

WOODFORD FUNDS (IRELAND) ICAV

APPLICATION FORM

04

SELECT SUB-FUND AND SETTLEMENT CURRENCY*

Please tick the Sub-Fund in which the investment will be made

WOODFORD EQUITY INCOME FEEDER FUND

Please tick the currency in which the investment will be made

EURO

GBP

USD

PLEASE COMPLETE EITHER THE "MONETARY AMOUNT" OR THE "NO. OF SHARES" FIELD AND SPECIFY THE CURRENCY OF INVESTMENT*

Name of Sub-Fund

WOODFORD EQUITY INCOME FEEDER FUND

Share Class

Monetary Amount
(including currency of investment)

Number of Shares

Amount in Words

NAME(S) FOR REGISTRATION (BLOCK CAPITALS)*

SHAREHOLDER 1

First Name & Family Name/Company Name*

Street 1*

Street 2*

Town/Country/Postcode*

Contact Telephone Number *

Contact Fax Number & Email Address*

SHAREHOLDER 2

First Name & Family Name/Company Name*

Street 1*

Street 2*

Town/Country/Postcode*

Contact Telephone Number *

Contact Fax Number & Email Address*

NAME(S) FOR REGISTRATION (BLOCK CAPITALS)*

SHAREHOLDER 3

First Name & Family Name/Company Name*

Street 1*

Street 2*

Town/Country/Postcode*

Contact Telephone Number *

Contact Fax Number & Email Address*

SHAREHOLDER 4

First Name & Family Name/Company Name*

Street 1*

Street 2*

Town/Country/Postcode*

Contact Telephone Number *

Contact Fax Number & Email Address*

Mailing address
(if different from the address of the first named holder)

NAME(S) FOR REGISTRATION (BLOCK CAPITALS)*

All dealing instructions in relation to the Shares in the Fund must be received before the time(s) specified in the Fund's Prospectus and/or relevant Sub-Fund Supplement as the case may be, together, the "Prospectus"). Dealing Instructions received after such times will generally be deemed to have been received for the next relevant dealing day.

No redemption payment may be made until the original Application Form has been received and the Administrator is satisfied that all necessary anti-money laundering checks have been completed.

By ticking the below, I hereby consent to the provision of contract notes, statements and other reports, by secured electronic transmission by the Administrator in respect of my holdings in the Fund. I understand that I will receive an encrypted email and will need to log on to retrieve such documents.

Dealing and Holding Minimums

Please refer to the minimum subscription, holding and redemption levels on our website woodfordfunds/weiff.

Banking Details - THIS SECTION MUST BE COMPLETED BY ALL APPLICANTS*

BANK ACCOUNT DETAILS FOR SETTLEMENT OF REDEMPTION (AND DIVIDEND/DISTRIBUTION PROCEEDS IF APPLICABLE)

Name of Bank

A/c Name

Address of Bank

A/c

Sort Code

IBAN:

Swift Code

Reference Code:

Note: no third party payments will be undertaken.

Note: a request to change bank account details must be made in writing to the administrator and must be accompanied by a bank statement or banker's reference.

Notes

- (a) Requests for redemption or distribution payments to be made by telegraphic transfer will be subject to bank charges. Such charges will normally be payable by the Shareholder although the Fund has the discretion to determine that these charges should be borne by the Fund or the relevant Sub-Fund.
- (b) The Base Currency of the Sub-Fund and the designated currency of any Shares will be set out in the Prospectus and is also noted above. Applications for Shares shall be accepted in the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share Class.
- (c) Please ensure that you have read the Prospectus before completing this Application Form. Defined terms used in this Application Form are those used in the Prospectus (unless the context otherwise requires). For details of available share classes, please visit our website woodfordfunds.com/weif

Method of Payment

Note: currency subscription settlement times

GBP: 14:00 GMT,

EURO: 14:00 GMT

USD: 17:00 GMT

Note: Monies must come from the account of the investor.

Please pay monies in accordance with the deadlines outlined in the Prospectus.

Please remit payment to the following bank account:-

	FOR GBP SETTLEMENT	FOR EURO SETTLEMENT	FOR USD SETTLEMENT
To:	Barclays Bank	Barclays Bank	The Northern Trust International Banking Corporation
Address:	1 Churchill Place, London E14 5HP	1 Churchill Place, London E14 5HP	New Jersey
ABA/Sort Code:	20-32-53		Fedwire ABA: 026001122 CHIPS ABA: 0112
Swift Code:	BARCGB22	BARCGB22	CNORUS33
Beneficiary Bank	The Northern Trust International Banking Corporation, New Jersey	The Northern Trust International Banking Corporation, New Jersey Swift: (CNORUS33)	
A/C Number:	IBAN: GB64BARC 20325353529495	N/A	
Beneficiary account number:	647073-20019 (GBP)	647099-20019 (EUR)	148452-20010 (USD)

**Reference:
Register number and/or
order number**

*In an effort to standardize payments in this geographical location, SEPA has mandated any bank instructions outside of the European Union, including that of the Northern Trust International Banking Corporation (located in the US), remove IBANs as they do not meet the eligibility requirements governed by SEPA. Thus, any clients with Euro dominated payment instructions will need to update their instructions to exclude IBANs. Use of IBANs outside SEPA regions may cause delays in clearing and settlement as such payments will require manual repair in order to re-direct routing and finalize settlement.

WOODFORD FUNDS (IRELAND) ICAV

APPLICATION FORM

09

Please specify your Ordering Institution details for subscriptions*

Currency Correspondent Bank
Swift/ABA Account Number

Distribution/Dividend Requirements *

Paid by Telegraphic Transfer

Distributions paid by Telegraphic Transfer will be paid to the account specified above. Should you require your distribution to be paid to another account, please enter the banking details below. Distributions due will automatically be re-invested if you have failed to provide satisfactory evidence of your identity in accordance with the Administrator's anti-money laundering procedures notwithstanding any election to the contrary by you.

Name of Bank
A/c Name
Address of Bank
A/c Number
Sort Code IBAN NO
Swift Code Reference Code:

Agent Details

Contact Name
Agent Name
Address
Contact Fax Number Contact Telephone Number
VAT Registration Number Regulator
Regulator Approval Number
Agents Stamp
Agency Number Commission Terms agreed with the Fund Promoter

Return of Values (Investment Undertakings) Regulations 2013

The Fund must collect additional information in order to satisfy Return of Values (Investment Undertakings) Regulations 2013 section now needs to be revised to reflect correct SI reference number- SI No. 245/2013. Therefore any individual, ICAV or any unincorporated body of persons which are an Irish resident or ordinarily Irish resident must provide the following additional information:

Tax Identification Number (TIN) / PPS Number

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

P60
P45
P21 Balancing Statement
Payslip (where employer is identified by name or tax number)
Drug Payment Scheme Card
European Health Insurance Card
Tax Assessment
Tax Return Form
PAYE Notice of Tax Credits
Child Benefit Award Letter /Book
Pension Book
Social Services Card
Public Services Card

In addition, any printed documentation issued by the Revenue Commissioners or by the Department of Social Protection which contain your name, address and tax reference number will also be acceptable. In the case of joint account holders, the additional documentation is required for each applicant.

Your personal information will be handled by the Administrator or its duly appointed delegates as Data Processor for the Fund in accordance with the Data Protection Acts 1988 to 2003. Your information provided herein will be processed for the purposes of complying with the Return of Values (Investment Undertakings) Regulations 2013 and this may include disclosure to the Irish Revenue Commissioners.

Anti-Money Laundering Verification Requirements in accordance with The Criminal Justice (Money Laundering and Terrorist Financing) Act, 2010, as amended

Guide to completing this form.

- **Part I** Beneficial Ownership Detail must be provided by **All Applicants**
- **Part II** To be completed by any applicant which is a **Recognised Regulated Entity**; e.g. a bank, provider of financial services or nominee company investing on its own behalf or on behalf of a third party and if regulated for compliance with applicable Anti Money Laundering regulations in a Prescribed Country provided that the name of Recognised Regulated Entity appears on the share register of the Fund[†]
- **Part III** To be completed by any **Individual (s) investing in their own name**
- **Part IV** To be completed by any **Unregulated Nominee Company** that does not fall within scope of Part II above where the Nominee Company is a wholly owned subsidiary of a Recognised Regulated Entity
- **Part V** To be completed by any **Politically Exposed Person(s)** investing into the Fund
- **Part VI** To be completed by **Other Investors** investing into the Fund

Note that, in all cases, the Administrator or Fund may, at its absolute discretion request further due diligence documentation/ information to satisfy applicable procedural and regulatory requirements.

[†] Prescribed Countries as set out in SI 347 of 2012: Australia, Austria, Belgium, Brazil, Bulgaria, Canada, Channel Islands, Cyprus, Czech Republic, Denmark, Estonia, Finland, France, Germany, Greece, Hong Kong, Hungary, Iceland, India, Ireland, Isle of Man, Italy, Japan, Latvia, Liechtenstein, Lithuania, Luxembourg, Malta, Mexico, Netherlands, Norway, Poland, Portugal, Romania, Singapore, Slovakia, Slovenia, South Africa, South Korea, Spain, Sweden, Switzerland, United Kingdom, United States, The Dutch overseas territories of Netherlands Aruba, Curacao, Sint Maarten, Bonaire, Sint Eustatius and Saba. The French overseas territories of Mayotte, New Caledonia, French Polynesia, Saint Pierre and Miquelon and Wallis & Futuna.

PART I – Beneficial Ownership Detail

Full Name of any Individual with a beneficial interest of 25% or more in this investment or anyone who otherwise exercises control of the legal entity, where applicable:

1	<input type="text"/>
2	<input type="text"/>
3	<input type="text"/>
4	<input type="text"/>

Note: If there is/ are no Individual(s) with a beneficial interest of 25% or more in this investment or anyone that otherwise exercises control of the legal entity, where applicable, please tick the box:

PART II – Recognised Regulated Entities

Applicant is a Recognised Regulated Entity (as previously defined) acting on its own account or on behalf of a third party

YES

Name of Regulatory Authority

Applicable Domestic Regulations

PART III - Individual(s)

Please provide

1. A copy photographic identity document e.g. Passport or Driver's Licence and
2. Two copies of non-photographic identity documents e.g. utility bill / bank statement dated within the last six months

Current Occupation (s)

Date of Birth

In the case of joint account holders, please supply the relevant documentation and information in respect of all holders.

PART IV – Unregulated Nominee Company where the Nominee Company is a wholly owned subsidiary of a Recognised Regulated Entity

Please provide

1. Proof of Regulatory Status of Parent Company and confirmation from the Parent that the Nominee is a wholly owned subsidiary and applies the parent's AML policy or
2. Documentation in accordance with the legal form of the Nominee Company (see Part VI)

PART V – Politically Exposed Persons

A **Politically Exposed Person** is defined as an individual who is or was at any time in the preceding 12 months entrusted with a prominent public function or immediate family members of such persons or persons known to be close professional associates of such persons.

Please confirm whether you are a **Politically Exposed Person (PEP)** YES: NO:

Required Identity Verification Documentation

1. Certified Copy Photographic Identity Document e.g. Passport or Driver's Licence and
2. Two Certified Copies of Proof of Residential Address Verification e.g. utility bill / bank statement dated within the last six months
3. Source of Funds
4. Source of Wealth

Note: In terms of certified documents, this means that there is an original signature on the document from a suitable person confirming the documents are a true copy of the original, and they will need to sign and date it, printing their name, occupation, address, telephone number and email address. Suitable persons include any of the following; police officer, practicing solicitors, embassy consular staff, financial institutions, medical professions, notaries public. The person certifying the documents should be independent of the investor.

A. Source of Funds

Please provide details

- | | | | |
|--|--------------------------|------------------------------|--------------------------|
| Earnings from Employment/Self Employment | <input type="checkbox"/> | Inheritance or Gift | <input type="checkbox"/> |
| Investment Income | <input type="checkbox"/> | Matured Investment | <input type="checkbox"/> |
| Lump Sum Retirement | <input type="checkbox"/> | Court Award | <input type="checkbox"/> |
| Sale of Property | <input type="checkbox"/> | Other – please specify below | <input type="checkbox"/> |
| Other | <input type="text"/> | | |

B. Source of Wealth

Please provide a brief description of your source of wealth

(source of total accumulated net worth)

PART VI – OTHER INVESTORS (Standard Customer Due Diligence)

If you fall under one of the investor categories outlined below please provide documents evidencing the requested information.

Note that, in all cases this is an indicative list only and the Administrator or Fund may, at its absolute discretion request further due diligence documentation/ information to satisfy applicable procedural and regulatory requirements.

Listed Company on a Recognised Exchange Prescribed Country

1. Please provide Proof of Listing on a recognised stock exchange in a Prescribed Country

Listed Company – Not Appearing on a Recognised Exchange or not located in a Prescribed Country

Please provide:

1. Proof of listing of the company
2. Full name of the company
3. Registered number of the company
4. Registered office address of the company
5. Principal business address of the company
6. Details of Directors of the company – including name, residential address and date of birth
7. Detail of any Beneficial Owners who are natural persons, who own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company
8. Confirmation as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) identify any Beneficial Owner
9. Verification of identity of Company by providing one of the below:
 - Search of the relevant company registry; or
 - Copy of Certificate of incorporation or equivalent; or
 - Copy of Memorandum and Articles of Association or equivalent; or
 - Copy of latest audited financial statements
10. Authorised Signatory List

Wholly Owned Subsidiary of a Listed Company

Please provide

1. Full name of the subsidiary company
2. Registered number of the subsidiary company
3. Registered office address of the subsidiary company
4. Principal business address of the subsidiary company
5. Details of Directors of the company - including name, residential address and date of birth
6. Detail of any Beneficial Owner beneficially entitled to more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the entity. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form
7. Confirmations as to whether the company is investing on its own behalf or on behalf of underlying investors and (as applicable) provide identity detail for any Beneficial Owner
8. Verification of identity of the subsidiary company by providing one of the below:
 - Search of the relevant company registry; or
 - Copy of Certificate of incorporation or equivalent; or
 - Copy of Memorandum and Articles of Association or equivalent; or
 - Copy of latest audited financial statements
10. Authorised Signatory List

Private Company

Please provide

1. Full name of the company
2. Registered number of the company
3. Registered office address of the company
4. Principal business address of the company
5. Details of directors of the company – including name, residential address and date of birth
6. Documentation to verify the identity of two directors or one director and one authorised signatory in line with legal form (If individuals, one proof of ID and one proof of address is required)
7. Detail of any Beneficial Owners who are natural persons, own more than 25% of the share capital, profit or voting rights or otherwise exercise control over the management of the company. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form
8. Verification of identity of the company by providing one of the below:
 - Search of the relevant company registry; or
 - Copy of Certificate of incorporation or equivalent; or
 - Copy of Memorandum and Articles of Association or equivalent; or
 - Copy of audited financial statements
9. Authorised Signatory List

Partnership

Please provide

1. Full name of the partnership
2. Registered office address
3. Principal business address of the partnership
4. Detail of all partners – including name, residential address and date of birth
5. Documentation to verify the identity of two partners or one partner and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
6. Detail of any partners who own more than 25% of the partnership capital, profit or voting rights or otherwise exercise control over the management of the partnership. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form. Note: Where the beneficial owner is a corporate entity, Northern Trust requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.)
7. Constitutional Document for the partnership (e.g. Partnership Agreement)
8. Authorised Signatory List

Limited Liability Company (LLC)

Please provide

1. Full name of the LLC
2. Registered office address of the LLC
3. Principal business address of the LLC
4. Details of all Managing Members – including name, residential address and date of birth
5. Documentation to verify the identity of two Managing Members or one Managing Member and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
6. Detail of any Member beneficially entitled to more than 25% of the entity's share capital or otherwise exercise control over the management of the entity. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form
7. Constitutional Document
8. Operating Agreement
9. Authorised Signatory List

Collective Investment Scheme ('CIS')

Please provide

1. Full name of CIS
2. Registered address of CIS
3. Prospectus or equivalent
4. Name and address of scheme promoter
5. Name and address of scheme administrator
6. Name and address of entity carrying out anti-money laundering checks upon the scheme investors and confirmation that entity is regulated for AML purposes
7. Identity detail for any investors who own more than 25% of the share capital
8. Authorised Signatory List

Trust, Foundation or similar entity

Please provide

1. Full name of trust, foundation or similar entity
2. Registered address of trust, foundation or similar entity
3. Legal form of the trust, foundation or similar entity
4. Trust deed or equivalent or confirmation of the entity to an appropriate register
5. Detail of Nature / purpose of the Trust, foundation or similar entity
6. Details of all trustees – including name, residential address and date of birth
7. Documentation to verify the identity of two trustees or one trustee and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
8. Identity detail for any Beneficial Owners who own more at least 25% of the share capital or voting rights or otherwise exercises control over the trust. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form. Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc.)
9. Details of settlor – including name, residential address and date of birth, as applicable
10. Details of protector (as appropriate) – including name, residential address and date of birth, as applicable
11. Authorised Signatory List

Employee/ Superannuation Pension Scheme

Please provide

1. Proof of registration from the relevant tax authorities

General Pension Scheme

Please provide

1. Full name of the pension scheme
2. Registered office address of the pension scheme
3. Confirmation of registration (as appropriate) from the relevant tax authorities or pension's board or
4. Documentation to verify the identity of two Trustees / Directors / Governors / Board Members or one Trustee / Director / Governor / Board Member and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
5. Names of Trustess/Directors/Governors/Board Members or equivalent
6. Constitutional/Formation Document (e.g. Trust Deed)
7. Authorised Signatory List

Registered Charity

Please provide

1. Extract from the relevant Charities Register e.g. UK Charities Commission

Unregistered Charity

Please provide

1. Full name of the charity
2. Nature/purpose including the nature of the funding of the charity
3. Registered office address of the charity
4. Principal business address of the charity
5. Details of Trustees / Directors / Governors / Board Members or equivalent – including name, residential address and date of birth
6. Documentation to verify the identity of two Trustees / Directors / Governors / Board Members or one Trustee / Director / Governor / Board Member and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
7. Details of beneficiaries (where ascertainable)
8. Constitutional/Formation Document for the charity
9. Authorised Signatory List

Club or Society

Please provide

1. Full name of the club / society
2. Registered office address of the club / society
3. Nature / Purpose including the nature of funding of the club / society
4. Confirmation of the legal status of the club / society
5. Constitutional / Formation Document (e.g. Trust Deed) and / or copy of audited financial statements (if available)
6. Details of officers of the club / society
7. Documentation to verify the identity of two officers of the Club / Society or one officer and one authorised signatory (If individuals, one proof of ID and one proof of address is required)
8. Authorised Signatory List

Government / Public Body in a Prescribed Country

Please provide

1. Background from a reliable source (e.g. internet search)

Government / Public Body in Non Prescribed Country

Please provide

1. Full name of the government / public authority
2. Nature and status the government / public authority
3. Registered office address of the government / public authority
4. Name of the home state authority and nature of its relationship with the government / public authority
5. Detail of ownership of the government / public authority
6. Details of main public body officials – including name, residential address and date of birth
7. Identity detail for all persons who own or control over 25% of the entity's share capital, profit or voting rights or otherwise exercises control over the management of the entity
Note: Where the beneficial owner is a corporate entity, the Administrator requires details of ultimate beneficial owners (this can be demonstrated through an organisation chart signed by an authorised signatory or shareholder register or other company documentation etc)
8. Appropriate background information on the entity (e.g. via internet search)
9. Authorised Signatory List

School, College or University

Please provide

1. Full name of school, college or university
2. Registered office address school, college or university
3. Detail to allow verification of identity of school, college or university from relevant registers and/or from obtaining appropriate background information (e.g. via internet search)
4. Documentation to verify the identity of two officials or one official and one authorised signatory (If individuals, one proof of ID and one proof of address is required) or 6 and 7 below
5. Confirmation of ownership of the entity. In particular, confirmation of public ownership or independent ownership
6. Where independently owned, identity detail of all persons who own or control over 25% of the entity's share capital, profit or voting rights. Where the Beneficial Owner is deemed high risk per NT risk rating requirements, the identity should be verified in line with its legal form
7. Detail of main officials of school, college or university – including name, residential address and date of birth
8. Authorised Signatory List

REPRESENTATIONS AND WARRANTIES

- I / We confirm that I am/we are 18 years of age or over.
- I / We, having received and considered a copy of the current Prospectus, any relevant supplements thereto and the most recent annual and / or semi-annual report of the Fund (if any), hereby confirm and declare that this application is based solely on the information contained in such documentation and is made pursuant to the terms of this Application Form. In addition, I / We confirm that I / We have received and read the information contained in this form and confirm that a copy of the Key Investor Information Document has been supplied to me / us. I / We confirm that I / We have read the Key Investor Information Document and that any future investments to any other sub-fund or share class of the umbrella fund can also be transacted based on this confirmation. I / We hereby acknowledge and agree that the updated KIID for each Share Class is available at the Investment Manager's website at woodfordfunds.com/weiff and that I / we will read and review the most up-to-date version of the relevant KIID prior to making any subsequent application for Shares in the Fund.
I / We request and authorise
to act in accordance with my / our instructions.
- I / We agree that the issue and allotment to me / us of the Shares is subject to the provisions of the Prospectus, that subscription for Shares will be governed and construed in accordance with Irish law and I / we confirm that by subscribing for Shares, I / we are not relying on any information or representation other than such as may be contained in the Prospectus and the most recent annual or semi annual report (if available) thereto.
- I / We certify that I am a / we are eligible to invest in the Fund and I am / we are not acquiring Shares for or on behalf of, or for the benefit of, any person or entity who/which is not eligible to invest in the Fund nor do I / we intend transferring any Shares which I / we may purchase to any person or entity who / which is not eligible to invest in the Fund. I / We confirm that I / we are aware of the risks involved in the proposed investment and of the fact that inherent in such investment is the potential to lose the entire sum invested.
- I / We agree to notify the Fund or the Administrator immediately if I / we become aware that any of the representations, declarations or warranties given by me / us in this Application Form is / are no longer accurate and complete in all respects and agree immediately to take such action as the Fund may direct, including where appropriate, redemption of my / our entire holding.
- I / We agree to indemnify the Administrator, on its own behalf and as agent of the Fund and agree to keep the Administrator and the Fund indemnified against any loss of any nature whatsoever arising to any of them as a result of any breach of any of the representations, warranties or declarations given by me / us in this Application Form.
- I / We have such knowledge and experience in business and financial matters or have obtained advice from a professional adviser such that I am/we are capable of evaluating the merits, and the risks, of an investment by me/us in the Fund.
- I / We understand that the tax disclosure set forth in the Prospectus is of a general nature and may not cover the jurisdiction in which I am / we are subject to taxation and that the tax consequences of my / our purchase of Shares depend on my/our individual circumstances.
- I / We acknowledge the right of Fund at any time to require the mandatory redemption of Shares in the circumstances provided for in the Prospectus.
- I / We understand that the tax disclosure set forth in the Prospectus is of a general nature and may not cover the jurisdiction in which I am / we are subject to taxation and that the tax consequences of my / our purchase of Shares depend on my/our individual circumstances.
- I / We acknowledge the right of Fund at any time to require the mandatory redemption of Shares in the circumstances provided for in the Prospectus.

Please tick as appropriate:

(a) I am a U.S. Person (as defined in the Prospectus) and have completed the Application Form for applicants who are U.S. Persons; or

(b) I / We hereby certify that the Shares are not being acquired for the benefit of, directly or indirectly, any U.S. Person nor in violation of any applicable law, and that I / we will not, subject to the conditions set forth in the Prospectus, sell or offer to sell or transfer Shares in the United States or to or for the benefit of a U.S. Person.

In particular: (a) I / we understand that the Fund has not been and will not be registered under the United States Investment Company Act of 1940, as amended, that the Shares have not been registered and will not be registered under the United States Securities Act of 1933, as amended, and that the Shares have not been qualified under the securities laws of any state of the United States and may not be offered, sold or transferred in the United States or to or for the benefit of, directly or indirectly, any U.S. Person; (b) I am not / none of us is a U.S. Person; and (c) I am not / none of us is acquiring the Shares for the account or benefit, directly or indirectly, of any U.S. Person or with a view to their offer, sale or transfer within the United States or to or for the account or benefit, directly or indirectly, of any U.S. Person.

– I / We will hold Shares on behalf of a U.S. Taxpayer (as defined below):

Yes No (please tick the appropriate box)

If the “yes” box is ticked, then I / we understand the U.S. tax consequences of such an investment. I / We agree to provide the Fund with such additional tax information as it may from time to time request.

*“U.S. Taxpayer” is defined to include a U.S. citizen or resident alien of the United States (as defined for United States federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organised in, or under the laws of, the United States or any state thereof (including the District of Colombia); any other partnership that is treated as a U.S. Taxpayer under U.S. Treasury Department regulations; any estate, the income of which is subject to U.S. income taxation regardless of source; and any trust over whose administration a court within the United States has primary supervision and all substantial decisions of which are under the control of one or more U.S. fiduciaries. Persons who have lost their U.S. citizenship and who live outside the United States may nonetheless, in some circumstances, be treated as U.S. Taxpayers.

An investor may be a “U.S. Taxpayer” but not a “U.S. Person”. For example, an individual who is a U.S. citizen residing outside of the United States is not a “U.S. Person” but is a “U.S. Taxpayer”.

– I / We declare that the entity hereby subscribing for Shares is neither a Benefit Plan Investor nor investing on behalf of or with any assets of a Benefit Plan Investor as defined below. (Benefit Plan Investors should contact the Fund.)

“Benefit Plan Investor” is used as defined in U.S. Department of Labor (“DOL”) Regulation § 2510.3-101(f)(2), and includes (i) any employee benefit plan (as defined in Section 3(3) of the Employee Retirement Income Security Act of 1974, as amended (“ERISA”)), whether or not such plan is subject to Title I of ERISA (which includes both U.S. and non-U.S. plans, plans of governmental entities as well as private employers, church plans, and certain assets held in connection with nonqualified deferred compensation plans); (ii) any plan described in Section 4975(e)(1) of the Internal Revenue Code of 1986, as amended, (the “Code”) (which includes a trust described in Code Section 401(a) which forms a part of a plan, which trust or plan is exempt from tax under Code Section 501(a), a plan described in Code Section 403(a), an individual retirement account described in Code Section 408 or 408A or an individual retirement annuity described in Code Section 408(b), a medical savings account described in Code Section 220(d) and an education savings account described in Code Section 530); and (iii) any entity whose underlying assets include plan assets by reason of a plan’s investment in the entity (generally because 25 per cent. or more of a class of interests in the entity is owned by plans). Benefit Plan Investors also include that portion of any insurance company’s general account assets that are considered “plan assets” and (except if the entity is an investment company registered under the 1940 Act) the assets of any insurance company separate account or bank common or collective trust in which plans invest.

– If I am / we are a commodity pool, my / our investment is directed by an entity which (i) is not required to be registered in any capacity with the CFTC or to be a member of the National Futures Association (“NFA”), (ii) is exempt from registration or (iii) is duly registered with the CFTC in an appropriate capacity or capacities and is a member in good standing of the NFA.

– Investment Company Representations:

(a) I am / We are neither an investment company required to be registered under the Investment Company Act of 1940, as amended (the “1940 Act”), nor an issuer that, but for an exception from the definition of “investment company” under the 1940 Act, would be an investment company

(b) I am/We are an investment company subject to registration or would be an investment company but for an exception under the 1940 Act

I / We have U.S. Person Beneficial Owner(s).

(State the number, not the percentage, of U.S. Person Beneficial Owners. Investment companies with U.S. Person beneficial owners must contact the Administrator.)

– I / We, if not a natural person, am / are duly organised, validly existing and in good standing under the laws of the jurisdiction in which I am / we are organised and I/we have the power and authority to enter into and perform my/our obligations under this Application Form.

– I am / we are able to bear the economic risk of an investment in the Shares, including, without limitation, the risk of loss of all or a part of my / our investment. I / we do not have an overall commitment to investments which are not readily marketable that is disproportionate to my / our net worth, and my / our investment in the Shares will not cause such overall commitment to be excessive.

– The Administrator and the Fund are each hereby authorised and instructed to accept and execute any instructions in respect of the Shares to which this application relates given by me / us in written form or by facsimile. I / We hereby agree to indemnify the Administrator, on its own behalf and as agent of the Fund and agree to keep the Administrator indemnified against any loss of any nature whatsoever arising as a result of the Administrator acting upon facsimile instructions. The Administrator may rely conclusively upon and shall incur no liability in respect of any action taken upon any notice, consent, request, instruction or other instrument believed in good faith to be genuine or to be signed by properly authorised persons.

– I / We acknowledge that due to anti-money laundering requirements operating within Ireland, the Administrator or the Fund (as the case may be) may require further identification of the applicant(s) before the application can be processed and the Administrator, on its own behalf and as agent of the Fund and the Fund shall be held harmless and indemnified against any loss arising as a result of a failure to process the application, or a delay in processing any redemption requests, if such information requested by the Administrator or the Fund has not been provided by me/us or has been provided in incomplete form.

– I / We hereby accept such lesser number of Shares, if any, than may be specified above in respect of which this application may be accepted.

– In respect of joint applicants only, we direct that on the death of one of us the Shares for which we hereby apply be held in the name of and to the order of the survivor or survivors of us or the executor or administrator of the last of such survivor or survivors.

– I / We consent to personal information obtained in relation to me / us being handled by the Administrator, the Fund, or the Investment Manager and their delegates, agents or affiliates in accordance with the Irish Data Protection Acts 1988 to 2003. Information in relation to me / us will be held, used, disclosed and processed for the purposes of (a) managing and administering my / our holdings in the Fund and any related account on an ongoing basis; (b) for any other specific purposes where I have given specific consent to do so; (c) to carry out statistical analysis and market research (d) to comply with any applicable legal, tax or regulatory obligations including legal obligations under company law, tax law and anti-money laundering legislation; (e) and for disclosure and transfer whether in Ireland or elsewhere (including companies situated in countries outside of the European Economic Area which may not have the same data protection laws as in Ireland) to third parties including my/our financial adviser (where appropriate), regulatory bodies, taxation authorities, auditors, technology providers or to the Fund and its delegates and its or their duly appointed agents and any of their respective related, associated or affiliated companies for the purposes specified above; (f) For other legitimate business interests of the Fund. I / We hereby acknowledge my/ our right of access to and the right to amend

and rectify my / our personal data, as provided herein. I / We understand that the Fund is a data controller and will hold any personal information provided by me / us in confidence and in accordance with the Data Protection Act 1988 as amended by the Data Protection (Amendment) Act 2003. I / We consent to the recording of telephone calls that I / we make to and receive from the Administrator, the Fund or the Investment Manager and their delegates or duly appointed agents and any of their respective related, associated or affiliated companies for record keeping, security and / or training purposes. I / We consent to the Fund or the Investment Manager sending information about other investment services to me/us by letter, telephone or other reasonable means of communication. I / We understand that I / we have a right not to receive such information. If you do wish to receive such information and/or marketing material, **please tick here:**

I / We hereby authorise the Fund and the Administrator to retain all documentation provided by me / us in relation to my / our investment in the Fund for such period of time as may be required by Irish law, but for not less than five years after the period of investment has ended.

- The Administrator or Fund may disclose personal information to the Depositary and / or the Investment Manager and / or third parties where necessary or for legitimate business interests. This may include disclosure to third parties such as auditors and the Central Bank of Ireland or agents of the Administrator who process the personal information for anti-money laundering purposes or for compliance with foreign regulatory requirements. The Administrator may and will hold all or part of the personal information in relation to your unit / share holding in accordance with legal and regulatory requirements even after you have fully redeemed from the Fund.
- I / We consent to the processing of my / our information and the disclosure of my / our information as outlined above and to the Investment Manager and where necessary or in the Fund's legitimate interests to any company in the Investment Manager's group of companies or agents of the Fund including companies situated in countries outside the European Economic Area, which may not have the same data protection laws as in Ireland.

From time to time, the Investment Manager may send you information about other products or services which they offer. You have a right not to receive such information. If you do wish to receive such information and/or marketing material, **please tick here:**

- I / We shall supply the Fund with executed copies of those documents attached, or referred to, in Annex 1 (for US and Non-US Taxpayers).
- I / We agree to provide to the Fund, the Manager and the Administrator at such times as each of them may request such declarations, certificates, self-certification forms, withholding statements or documents as each of them may reasonably require (the "Tax Information") in connection with this investment (including for the purposes of tax, FATCA and/or CRS regulations and reporting requirements). Should any information furnished to any of them become inaccurate or incomplete in any way, I / we hereby agree to notify the Fund, the Manager or the Administrator immediately of any such change and further agree to request the redemption of Shares in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Fund.
- In addition to the Tax Information, I / We agree to promptly provide, and periodically update, at any times requested by the Manager or the Administrator with any information (or verification thereof) the Manager or the Administrator deems necessary for the Fund to comply with tax reporting requirements, FATCA and/or CRS (including any imposed by any inter-governmental agreement (IGA) or any legislation, law, regulation or other official guidance in relation to any IGA on the implementation of FATCA or CRS). This may include such information as is required to evidence the Fund's (or any accountholder in the Fund's) status for FATCA or CRS purposes, including (not limited to) whether the Fund is a financial institution, or whether its account holders are US persons for purposes of FATCA, or what the account holder's country of tax residence for purposes of CRS.
- We represent and warrant the completeness and accuracy of any information (as at the date of submission) and authorise the Fund, the Manager and the Administrator to act upon such information in good faith, including, but not limited to, disclosing or submitting such information to the Irish tax authorities. I / We agree to waive any provision of foreign law that would, absent such a waiver, prevent compliance with such requirements. The Fund will have no obligation to carry out any investigation with respect to the truth, accuracy or completeness of any information provided by us and I / We will, on demand, hold the Fund harmless from any liability resulting from the my / our failure to provide complete and accurate Information.

- I / We hereby acknowledge that if I / we fail to provide any information on a timely basis, I / We may be subject to 30% U.S. withholding tax on the investor's share of "withholdable payments" (as defined for purposes of FATCA) received by the Fund.
- I / We hereby acknowledge that if I / we fail to provide any information and such failure results in the Fund being unable to comply with FATCA, any IGA or CRS, the Manager may exercise its right to completely redeem an applicant (at any time upon any or no notice). I / We further acknowledge and agree to indemnify the Fund and its other investors for any losses resulting from our failure to meet its obligations under this Section, including any U.S. withholding tax imposed on the Fund.
- I / We hereby acknowledge that any notice or document may be served by the Fund or Administrator on me / us in the manner specified from time to time in the Prospectus and, for the purposes of the Electronic Commerce Act 2000, if I have provided an e-mail address or fax number to the Fund or its delegate, consent to any such notice or document being sent to me / us by fax or electronically to the fax number or e-mail address previously identified to the Fund or its delegate which I / we acknowledge constitutes effective receipt by me / us of the relevant notice or document. I / we acknowledge that I/we am/are not obliged to accept electronic communication and may at any time choose to revoke my / our agreement to receive communications by fax or electronically by notifying the Fund in writing at the above address, provided that my/our agreement to receive communications by fax or electronically shall remain in full force and effect pending receipt by the Fund of written notice of such revocation.
- Where I / we am / are investing as nominee, I / we shall provide our client(s) with the KIID issued in respect of the Sub-Fund and / or Unit Class (as the case may be) and I / we shall ensure that we do so in compliance with Commission Regulation (EU) No. 583/2010, as amended from time to time or by any supplemental legislation and in compliance with the applicable legislation in any jurisdiction in carrying out this activity. I / We shall maintain records of my / our provision of the KIID to my / our clients and shall furnish such records to the Fund, or its delegates, upon request.
- I / We also warrant and declare that, to the best of my / our knowledge and belief, the monies being invested pursuant to this application do not represent directly or indirectly the proceeds of any criminal activity and the investment is not designed to conceal such proceeds so as to avoid prosecution for an offence or otherwise.
- I / We understand and accept that the Fund reserves the right to compulsorily repurchase and cancel any Shares held by me / us where I / we fail to provide the necessary documentation to allow the Fund (or any of its service providers) to comply with its obligations under applicable anti-money laundering and counter terrorist financing regulations.

Declaration of Residence outside of Ireland*

Applicants resident outside Ireland are required by the Irish Revenue Commissioners to make the following declaration which is in a format authorised by them, in order to receive payment without deduction of tax. It is important to note that this declaration, if it is then still correct, shall apply in respect of any subsequent acquisitions of Shares.

Declaration on own behalf

I / we* declare that I am / we are* applying for the Shares on my own / our own behalf / on behalf of a company* and that I am / we are/the company* is entitled to the Shares in respect of which this declaration is made and that

- I am / we are / the company is* not currently resident or ordinarily resident in Ireland, and
- Should I / we / the company* become resident in Ireland I will / we will* so inform you, in writing, accordingly.

***Delete as appropriate (mandatory)**

Declaration as Intermediary

I / we* declare that I am / we are* applying for Shares on behalf of persons:

- who will be beneficially entitled to the Shares; and,
- who, to the best of my / our* knowledge and belief, are neither resident nor ordinarily resident in Ireland.

I / we* also declare that:

- unless I / we* specifically notify you to the contrary at the time of application, all applications for Shares made by me/us* from the date of this application will be made on behalf of such persons; and,
- I / we* will inform you in writing if I / we* become aware that any person, on whose behalf I / we* holds Shares, becomes resident in Ireland.

***Delete as appropriate (mandatory)**

Name and address of applicant

Signature of applicant or authorised signatory

(declarant)

Capacity of authorised signatory (if applicable)

Date

Joint applicants

Names:

Signatures:

IMPORTANT NOTES :

1. Non-resident declarations are subject to inspection by the Irish Revenue Commissioners and it is a criminal offence to make a false declaration.
2. To be valid, the application form (incorporating the declaration required by the Irish Revenue Commissioners) must be signed by the applicant. Where there is more than one applicant, each person must sign. If the applicant is a company, it must be signed by the company secretary or another authorised officer.
3. If the application form (incorporating the declaration required by the Irish Revenue Commissioners) is signed under power of attorney, a copy of the power of attorney must be furnished in support of the signature

Declaration of Residence within Ireland

Declaration referred to in Section 739D(6) Taxes Consolidation Act, 1997

I declare that the information contained in this declaration is true and correct.

I also declare that I am applying for the Shares on behalf of the applicant named below who is entitled to the Shares in respect of which this declaration is made and is a person referred to in Section 739D (6) of the Taxes Consolidation Act, 1997, being a person who is: (please tick as appropriate).

- A pension scheme
- A company carrying on life business within the meaning of section 706 TCA 1997
- An investment undertaking
- A special investment scheme
- A unit trust to which section 731(5) (a) TCA 1997 applies;
- A charity being a person referred to in section 739D(6)(f)(i) TCA 1997;
- A qualifying management company
- A specified company
- Entitled to exemption from income tax and capital gains tax by virtue of sections 784A(2), and 787I of the TCA 1997, (see further requirements for Qualifying Fund Manager below)
- A credit union to which Section 2 of the Credit Union Act, 1997 applies

Additional requirement where the declaration is completed on behalf of a pension scheme, a company carrying on life business within the meaning of section 706 TCA 1997, an investment undertaking, a special investment scheme, a unit trust to which section 731(5) (a) TCA applies, a qualifying management company or a credit union to which Section 2 of the Credit Union Act 1997 applies

I undertake that, in the event that the Shares cease to be assets of the *pension scheme / company carrying on life business within the meaning of section 706 TCA 1997 / investment undertaking /special investment scheme / unit trust to which section 731(5) (a) TCA applies / qualifying management company / credit union to which Section 2 of the Credit Union Act 1997 applies, including a case where the Shares are transferred to another such entity, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly. (*Delete as appropriate)

Additional requirements where the declaration is completed on behalf of a Charity

I also declare that at the time of making this declaration, the Shares in respect of which this declaration is made are held for charitable purposes only and;

Form part of the assets of a body of persons or trust related by the Revenue Commissioners as a body or trust established for charitable purposes only, or are, according to the rules or regulations established by statute, charter, decree, deed of trust or will, held for charitable purposes only and are so treated by the Revenue Commissioners.

I undertake that, in the event that the person referred to in paragraph (7) (d) of Schedule 2B TCA 1997 ceases to be a person referred to in Section 739D(6)(f)(i) TCA 1997, I will by written notice, bring this fact to the attention of the investment undertaking accordingly.

Additional requirements where the declaration is completed by a Qualifying Fund Manager

I also declare that at the time this declaration is made, the Shares in respect of which this declaration is made;

Are assets of an *approved retirement fund / an approved minimum retirement fund, and

Are managed by the declarant for the individual named below who is beneficially entitled to the Shares.

I undertake that, if the Shares cease to be assets of the *approved retirement fund/the approved minimum retirement fund, including a case where the Shares are transferred to another such fund, I will, by written notice, bring this fact to the attention of the investment undertaking accordingly. (* Delete as appropriate)

Additional requirements where the declaration is completed by an Intermediary

I / we* declare that I am / we are* applying for Shares on behalf of persons who to the best of my / our* knowledge and belief, have beneficial entitlement to each of the Shares in respect of which this declaration is made; and

is a person referred to in section 739D(6) TCA 1997.

I / we* also declare that

unless I / we* specifically notify you to the contrary at the time of application, all applications for Shares made by me / us* from the date of this application will be made on behalf of persons referred to in section 739D(6) TCA 1997; and

I / we* will inform you in writing if I/we* become aware that any person ceases to be a person referred to in section 739D(6) TCA 1997. (* Delete as appropriate)

Name of Applicant

Irish Tax Reference Number of Applicant

Authorised Signatory

Capacity in which declaration is made

Date

IMPORTANT NOTES:

1. This is a form authorised by the Revenue Commissioners which may be subject to inspection. It is an offence to make a false declaration.
2. Tax reference number in relation to a person, has the meaning assigned to it by Section 885 TCA 1997 in relation to a "specified person" within the meaning of that section. In the case of a charity, quote the Charity Exemption Number (CHY) as issued by Revenue. In the case of a qualifying fund manager, quote the tax reference number of the beneficial owner of the Shares.
3. In the case of (i) an exempt pension scheme, the administrator must sign the declaration (ii) a retirement annuity contract to which Section 784 or 785 applies, the person carrying on the business of granting annuities must sign the declaration (iii) a trust scheme, the trustees must sign the declaration. In the case of a charity, the declaration must be signed by the trustees or other authorised officer of a body of persons or trust established for charitable purposes only within the meaning of Sections 207 and 208 TCA 1997. In the case of a company, the declaration must be signed by the company secretary or other authorised officer. In the case of a unit trust it must be signed by the trustees. In any other case, it must be signed by an authorised officer of the entity concerned or a person who holds a power of attorney from the entity. If the latter, a copy of the power of attorney should be furnished in support of this declaration.

SIGNATURE

I / We declare that the information contained in this form and any attached documentation is true and accurate to the best of my / our knowledge and belief.

Date:

Signed

Signatory Capacity if applicable (i.e. Director/manager)

1.	<input type="text"/>	<input type="text"/>
2.	<input type="text"/>	<input type="text"/>
3.	<input type="text"/>	<input type="text"/>
4.	<input type="text"/>	<input type="text"/>

IN THE CASE OF ALL JOINT HOLDERS – ALL HOLDERS MUST COMPLETE THIS DECLARATION

FATCA Self-Certification ENTITY SELF-CERTIFICATION

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Sub-Fund with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

For further information on FATCA or CRS please refer to the Irish Revenue website at: woodfordfunds.com/facta or the following link to the OECD CRS Information Portal at: woodfordfunds.com/aeoi

If any of the information below about the investor's tax residence or FATCA / CRS classification changes in the future, please ensure that we are advised of these changes promptly.

(Mandatory fields are marked with an *)

Investors that are individuals should not complete this form and should complete the form entitled "Individual Self-Certification for FATCA and CRS".

Section 1: Investor Identification

Investor Name* (the "Entity")

**Country of Incorporation
or Organisation:**

Current Registered Address*

Number
Street

City, town, State, Province or County

Postal/ZIP Code

Country

**Mailing address
(if different from above)**

Number
Street

City, town, State, Province or County

Postal/ZIP Code

Country

Section 2: FATCA Declaration Specified U.S. Person:

Please tick either (a), (b) or (c) below and complete as appropriate.

a) The Entity is a Specified U.S. Person and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:

U.S. TIN: _____

Or

b) The Entity is not a Specified U.S. Person (please also complete Sections 3, 4 and 5)

Or

The Entity is a US person but not a Specified U.S. Person (please also complete Sections 3, 4 and 5)

Section 3: Entity's FATCA Classification* (the information provided in this section is for FATCA, please note your classification may differ from your CRS classification in Section 5)

3.1 Financial Institutions under FATCA:

If the Entity is a Financial Institution, please tick one of the below categories and provide the Entity's GIIN at 3.2

Irish Financial Institution or a Partner Jurisdiction Financial Institution

Registered Deemed Compliant Foreign Financial Institution

Participating Foreign Financial Institution

3.2 Please provide the Entity's Global Intermediary Identification number (GIIN) _____

3.3 If the Entity is a Financial Institution but unable to provide a GIIN, please tick one of the below reasons:

The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN

Please provide the sponsor's name and sponsor's GIIN

Sponsor's Name

Sponsor's GIIN

Exempt Beneficial Owner

Certified Deemed Compliant Foreign Financial Institution

Non-Participating Foreign Financial Institution

Excepted Foreign Financial Institution

3.4 Non-Financial Institutions under FATCA:

If the Entity is not a Financial Institution, please tick one of the below categories

Active Non-Financial Foreign Entity

Passive Non-Financial Foreign Entity
(If this box is ticked, please include self-certification forms for each of your Controlling Persons)

Excepted Non-Financial Foreign Entity

Section 4: CRS Declaration of Tax Residency (please note that you may choose more than one country)*

Please indicate the Entity's country of tax residence for CRS purposes, (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TIN")).

NOTE: Provision of a TIN is required unless you are tax resident in a Jurisdiction that does not issue a TIN.

If the Entity is not tax resident in any jurisdiction (e.g., because it is fiscally transparent), please indicate that below and provide its place of effective management or country in which its principal office is located.

Country of Tax Residency

Tax ID Number

Section 5: Entity's CRS Classification*

(The information provided in this section is for CRS. Please note an Entity's CRS classification may differ from its FATCA classification in Section 3)

For more information please see the CRS Standard and associated commentary.
woodfordfunds.com/crs

5.1 Financial Institutions under CRS

If the Entity is a Financial Institution, please tick one of the below categories

- Financial Institution under CRS (other than (II) below)
- An Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution (If this box is ticked, please indicate the name of any Controlling Person(s) of the Entity and complete a separate individual self-certification forms for each of your Controlling Persons **)

5.2 Non Financial Institutions under CRS

If the Entity is a Non Financial Institution, please tick one of the below categories

- Active Non-Financial Entity – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation
- Active Non-Financial Entity – a Government Entity or Central Bank
- Active Non-Financial Entity – an International Organisation
- Active Non-Financial Entity – other than (I)-(III) (for example a start-up NFE or a non-profit NFE)
- Passive Non-Financial Entity (If this box is ticked, please complete a separate Individual Self-Certification Form for each of your Controlling Person(s))

****Controlling Persons:**

NB: Please note that each Controlling Person must complete a Separate Individual Self-Certification form.

If there are no natural person(s) who exercise control of the Entity then the Controlling Person will be the natural person(s) who hold the position of senior managing official of the Entity.

For further information on Identification requirements under CRS for Controlling Persons, see the Commentary to Section VIII of the CRS Standard.
woodfordfunds.com/crs

INDIVIDUAL (CONTROLLING PERSON'S) SELF-CERTIFICATION

Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Sub-Fund with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

If you have any questions about this form or defining the investor's tax residency status, please refer to the OECD CRS Portal or speak to a tax adviser.

For further information on FATCA or CRS please refer to the Irish Revenue website at: woodfordfunds.com/facta or the following link to the OECD CRS Information Portal at: woodfordfunds.com/aeoi

If any of the information below about the investor's tax residence or FATCA/CRS classification changes in the future, please advise of these changes promptly.

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

Sections 1, 2, 3 and 5 must be completed by all investors.

Section 4 should only be completed by any individual who is a Controlling Person of an entity investor which is a Passive Non-Financial Entity. For further guidance see woodfordfunds.com/crs

(Mandatory fields are marked with an*)

Section 1: Investor Identification

Investor Name*

Current Residential Address*

Number
Street
City, town, State, Province or County
Postal/ZIP Code
Country

Mailing address (if different from above)

Number
Street
City, Town, State, Province or County
Postal/ZIP Code,
Country
Place Of Birth*
Town or City of Birth*
Country of Birth*
Date of Birth*

Section 2: FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes*:

Please tick either (a) or (b) and complete as appropriate.

(a) I confirm that [I am] / [the investor is] a U.S. citizen and / or resident in the U.S. for tax purposes and [my]/[its] U.S. federal taxpayer identifying number (U.S. TIN) is as follows:

OR

(b) I confirm that [I am not]/[the investor is not] a U.S. citizen or resident in the U.S. for tax purposes.

Section 3: CRS Declaration of Tax Residency (please note you may chose more than one country)*

Please indicate your / the investor's country of tax residence (if resident in more than one country please detail all countries of tax residence and associated taxpayer identification numbers ("TIN"). Please see the CRS Portal for more information on Tax Residency.

Country of Residency	Tax ID Number
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>

NOTE: Provision of a Tax ID number (TIN) is required unless you are tax resident in a Jurisdiction that does not issue a TIN.

Section 4 – Type of Controlling Person

(ONLY to be completed by any individual who is a Controlling Person of an entity investor which is a Passive Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For joint or multiple Controlling Persons please complete a separate Self-Certification form for each Controlling Person

Please confirm what type of Controlling Person applicable under CRS that applies to you/the investor by ticking the appropriate box	Please Tick	Entity Name
Controlling Person of a legal person – control by ownership	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal person – control by other means	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal person – senior managing official	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – settlor	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – trustee	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – protector	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – beneficiary	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a trust – other	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – settlor equivalent	<input type="checkbox"/>	<input type="text"/>
Controlling Person of a legal arrangement (non-trust) – trustee equivalent	<input type="checkbox"/>	<input type="text"/>

WOODFORD FUNDS (IRELAND) ICAV

APPLICATION FORM

34

Additional Subscription Form

Please complete this form in blue or black ink using **BLOCK CAPITALS**

Woodford Funds (Ireland) ICAV
C/o Northern Trust International Fund Administration Services (Ireland) Limited
Investor Services Department
George's Court
54-62 Townsend Street
Dublin 2
Ireland

REGISTERED INFORMATION

Registered Account Name

Account Number

Your Company Contact

DEAL INSTRUCTIONS

Amount to be invested

Amount

Amount in words

Name of Sub-Fund

WOODFORD EQUITY INCOME FEEDER FUND

Share Class

ORIGINATING ACCOUNT DETAILS

Bank Name

Bank Address

Sort Code

ABA

Account Name

Account Number

Payment Reference

Note: Any subscription proceeds paid in currencies other than the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be arranged by the Administrator at the cost and risk of the relevant investor.

A REQUEST TO CHANGE BANK ACCOUNT DETAILS MUST BE MADE IN WRITING TO THE ADMINISTRATOR AND MUST BE ACCOMPANIED BY A BANK STATEMENT OR BANKER'S REFERENCE.

PLEASE NOTE:

- Monies must originate from the account of the investor.
- Failure to complete these details accurately and in accordance with the original signed Application Form and forward monies within the relevant settlement time scale may result in the loss of good value and an interest claim from the Fund.
- I / We confirm that I / we have the authority to make this investment.
- I / We confirm that I / We have received and read the information contained in this form and confirm that a copy of the Key Investor Information Document has been supplied to me / us in relation to this new Sub-Fund or Share Class. I / We confirm that I / We have read the Key Investor Information Document. I / We also acknowledge and agree that the updated KIID for each Share Class is available at the Investment Manager's website at www.woodfordfunds.com/weiff and that I / we will read and review the most up-to-date version of the relevant KIID prior to making any subsequent application for Shares in the Fund. I / We confirm that any future investments to any other Sub-Fund or Class of the Fund can also be transacted based on this confirmation.
- I / We hereby agree to indemnify and hold harmless the Administrator, on its own behalf and as agent for the Fund, and its directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me / us to the Fund or the Administrator. The Administrator will not be responsible or liable for the authenticity of instructions received from me / us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.

Authorised Signatories

Print Name

Signatory 1	<input type="text"/>	<input type="text"/>
Signatory 2	<input type="text"/>	<input type="text"/>
Signatory 3	<input type="text"/>	<input type="text"/>
Signatory 4	<input type="text"/>	<input type="text"/>
Date	<input type="text"/>	<input type="text"/>

WOODFORD FUNDS (IRELAND) ICAV

APPLICATION FORM

F.F.C to**Account Name****Account Number**

Any redemption proceeds paid in currencies other than the Base Currency of the relevant Sub-Fund or the designated currency of the relevant Share Class will be converted into that currency at prevailing exchange rates. This foreign exchange transaction will be arranged by the Administrator at the cost and risk of the relevant investor.

PLEASE NOTE

- I / We confirm that I / we have the authority to make this redemption request.
- I / We hereby agree to indemnify and hold harmless the Administrator on its own behalf and as agent for the Fund and its respective directors, officers and employees against any loss, liability, cost or expense (including without limitation legal fees, taxes and penalties) which may result directly or indirectly, from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me / us to the Fund or the Administrator. The Administrator will not be responsible or liable for the authenticity of instructions received from me/us or any authorised person and may rely upon any instruction from any such person representing himself to be a duly authorised person reasonably believed by the Administrator to be genuine.

Authorised Signatories**Print Name**

Signatory 1

Signatory 2

Signatory 3

Signatory 4

Date

APPENDIX 1

“United States” means the United States of America, its territories and possessions, any state of the United States, and the District of Columbia.

“U.S. person” means:

Any natural person resident in the United States;

Any partnership or corporation organised or incorporated under the laws of the United States;

Any estate of which any executor or administrator is a U.S. person;

Any trust of which any trustee is a U.S. person;

Any agency or branch of a non-United States entity located in the United States;

Any non-discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary for the benefit of a U.S. person;

Any discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary organised, incorporated, or (if an individual) resident in the United States; and

Any partnership or corporation if: (A) organised or incorporated under the laws of any jurisdiction other than the United States; and (B) formed by a U.S. person principally for the purpose of investing in securities not registered under the United States Securities Act of 1933, as amended unless it is organised or incorporated, and owned, by “accredited investors” (as defined in Rule 501(a) under the United States Securities Act of 1933, as amended) who are not natural persons, estates or trusts.

Notwithstanding the foregoing paragraphs (i) through (viii):

- any discretionary account or similar account (other than an estate or trust) held for the benefit or account of a non-U.S. person by a dealer or other professional fiduciary organised, incorporated, or (if an individual) resident in the United States shall not be deemed to be a “U.S. person”;
- any estate of which any professional fiduciary acting as executor or administrator is a U.S. person shall not be deemed to be a “U.S. person” if: (i) an executor or administrator of the estate who is not a U.S. person has sole or shared investment discretion with respect to the assets of the estate; and (ii) the estate is governed by laws other than those of the United States;
- any trust of which any professional fiduciary acting as trustee is a U.S. person shall not be deemed to be a “U.S. person” if a trustee who is not a U.S. person has sole or shared investment discretion with respect to the trust assets, and no beneficiary of the trust (and no settlor if the trust is revocable) is a U.S. person;
- an employee benefit plan established and administered in accordance with (i) the laws of a country other than the United States and (ii) the customary practices and documentation of such country, shall not be deemed to be a “U.S. person”; and
- any agency or branch of a U.S. person located outside the United States shall not be deemed a “U.S. person” if: the agency or branch (i) operates for valid business reasons, (ii) is engaged in the business of insurance or banking, and (iii) is subject to substantive insurance or banking regulation, respectively, in the jurisdiction where located.

Further, none of the International Monetary Fund, the International Bank for Reconstruction and Development, the Inter-American Development Bank, the Asian Development Bank, the African Development Bank, the United Nations, or their agencies, affiliates and pension plans, or any other similar international organisation, or its agencies, affiliates and pension plans, shall be deemed to be a “U.S. person”.

“U.S. Taxpayer” includes a U.S. citizen or resident alien of the United States (as defined for U.S. federal income tax purposes); any entity treated as a partnership or corporation for U.S. tax purposes that is created or organized in, or under the laws of, the United States or any state thereof (including the District of Columbia); any other partnership that is treated as a U.S. Taxpayer under U.S. Treasury Department regulations; any estate, the income of which is subject to U.S. income taxation regardless of source; and any trust over whose

WOODFORD FUNDS (IRELAND) ICAV

APPLICATION FORM

administration a court within the United States has primary supervision and all substantial decisions of which are under the control of one or more U.S. fiduciaries. Persons who have lost their U.S. citizenship and who live outside the United States may nonetheless, in some circumstances, be treated as U.S. Taxpayers.

An investor may be a "U.S. Taxpayer" but not a "U.S. Person." For example, an individual who is a U.S. citizen residing outside of the United States is not a "U.S. Person" but is a "U.S. Taxpayer."

