

Offshore Funds

Investment Application Form - Individual Investors

PLEASE RETURN THIS COMPLETED FORM TO:

E-mail: offshoreinstructions@stanlib.com

Offshore Prospectus: A copy of the current prospectus is available at www.stanlib.com or by request from the Manager or Distributor.

KNOW YOUR CLIENT (KYC) DOCUMENTATION REQUIRED

We require, as a minimum, evidence of your:

- Legal name and name(s) currently used;
- Date of birth;
- Nationality;
- Principal residential address;
- Place of birth;
- Passport or National Identity Number; and Sex

Accordingly, please provide:

IDENTIFICATION DOCUMENT

- A certified photocopy of a current national identity document bearing photograph.

AND/ OR:

- A certified photocopy of a current valid passport bearing photograph. A copy of the document(s) should be originally signed by the holder in the presence of a certifying official. **(please take note of the certification parameters that must be adhered to below).**

RESIDENTIAL ADDRESS CONFIRMATION

Certified copy of one of the following:

- Utility bill (not a mobile phone bill)
- Local authority bill – i.e. rates or Council tax
- Address confirmation must be current i.e. statements/bills not more than three months old or valid agreement
- Bank/Building Society or Credit card statement
- Current tenancy contract or agreement

CERTIFICATION PARAMETERS

The suitable certifier must state that the copy document is:

- "Certified as a true copy of the original"

In addition, for photographic documentation:

- "The photograph bears a true likeness to (name of individual)"

Please be advised that "Certification" must clearly state the following information concerning the person who has certified the document(s):

- Name and signature
- Profession, or professional body which qualifies them as a suitable certifier
- Contact address / details
- Date of certification
- Position or capacity



REGISTRATION DETAILS OF THE FIRST HOLDER

Units will be issued in registered, non-certificated form. **Please note that the investment portfolio may have up to four holders, forms for the additional two investors may be requested from offshorequeries@stanlib.com.**

TITLE																						
SURNAME																						
FORENAME/S (PLEASE LIST ALL NAMES AS PER IDENTITY DOCUMENT)																						
FORMER NAMES (INCLUDING MAIDEN NAME IF APPLICABLE)																						
DESIGNATION OF ACCOUNT / PORTFOLIO (IF APPLICABLE)																						
ID/ PASSPORT NUMBER																						
DATE OF BIRTH					-					-												
	D	D	M	M			Y	Y	Y	Y												
TELEPHONE (HOME)						-						TELEPHONE (BUSINESS)					-					
CELLPHONE NUMBER																						
FAX NO (HOME)						-						FAX NO (BUSINESS)					-					
E-MAIL ADDRESS (FOR CORRESPONDENCE PURPOSES)																						
PERMANENT RESIDENTIAL ADDRESS																						
CITY											POSTAL CODE											
CORRESPONDENCE ADDRESS (IF DIFFERENT FROM RESIDENTIAL)																						
CITY											POSTAL CODE											
COUNTRIES OF LEGAL RESIDENCE																						
COUNTRIES OF DOMICILE																						



REGISTRATION DETAILS OF THE SECOND HOLDER

TITLE																												
SURNAME																												
FORENAME/S (PLEASE LIST ALL NAMES AS PER IDENTITY DOCUMENT)																												
FORMER NAMES (INCLUDING MAIDEN NAME IF APPLICABLE)																												
DESIGNATION OF ACCOUNT / PORTFOLIO (IF APPLICABLE)																												
ID/ PASSPORT NUMBER																												
DATE OF BIRTH	D D		-	M M		-	Y Y Y Y																					
TELEPHONE (HOME)				-							TELEPHONE (BUSINESS)			-														
CELLPHONE NUMBER																												
FAX NO (HOME)				-							FAX NO (BUSINESS)			-														
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CITY																			POSTAL CODE									
COUNTRIES OF LEGAL RESIDENCE																												
COUNTRIES OF DOMICILE																												



RISK ASSESSMENT NOTICE

Each applicant is required to complete the codes for Source of Income, Purpose of Investment, Industry and Occupation under the applicable code category. For example, applicant 1 to complete codes under 'applicant 1 code'

SOURCE OF INCOME

APPLICANT 1 CODE:	<input type="text"/>	APPLICANT 2 CODE:	<input type="text"/>	APPLICANT 3 CODE:	<input type="text"/>	APPLICANT 4 CODE:	<input type="text"/>
01. Gifts / inheritance / winnings		04. Passive income (Rental, Dividends, Interest)		07. Retirement / insurance pay out			
02. Trade / business		05. Savings		08. Salary / bonus			
03. Credit		06. Child / spousal support payments		09. Tax refund			

PURPOSE OF INVESTMENT

APPLICANT 1 CODE:	<input type="text"/>	APPLICANT 2 CODE:	<input type="text"/>	APPLICANT 3 CODE:	<input type="text"/>	APPLICANT 4 CODE:	<input type="text"/>
01. Start and expand a business		02. Education savings		03. Foreign exchange hedging		04. Save for retirement / financial goals	
						05. Winding up estate	

INDUSTRY

APPLICANT 1 CODE:	<input type="text"/>	APPLICANT 2 CODE:	<input type="text"/>	APPLICANT 3 CODE:	<input type="text"/>	APPLICANT 4 CODE:	<input type="text"/>
01. Government, state owned enterprise, armed forces		05. Politics		09. Administrative and support service		13. Professional, scientific, technical and education	
02. Gambling		06. Mining and quarrying		10. Agriculture, forestry and fishing		14. Electricity, water, gas supply and waste management	
03. Non-profit / religious organisation		07. Motor vehicles, transportation, distribution		11. Arts, entertainment, hospitality		15. Financial, investment and insurance	
04. Real estate		08. Unemployed		12. Construction		16. Human health and social work activities	
						17. Information, technology and communication	
						18. Manufacturing, wholesale or retail	

OCCUPATION

APPLICANT 1 CODE:	<input type="text"/>	APPLICANT 2 CODE:	<input type="text"/>	APPLICANT 3 CODE:	<input type="text"/>	APPLICANT 4 CODE:	<input type="text"/>
01. Executive / General		04. Management		07. Self employed		10. Clerical support	
02. Heads of government / cabinet minister / judges		05. Professional		08. Unemployed		11. Craft and trades worker	
03. Traditional leader / royal family		06. Religious leader		09. Technician, Sales or Services		12. General Staff	
		13. Retired		14. Sports Professional		15. Security Services	

CORRESPONDENCE METHOD

The Manager will by default communicate by electronic means, however, investors have the choice at any time to instruct the Manager to update the preferred correspondence method to post.

TICK IF YOU WISH CORRESPONDENCE BY POST



INVESTMENT DETAILS

The minimum investment amount is USD2,500 or currency equivalent.

Class Name	Share Class	Fund Currency	Investment Amount	Broker Initial Commission
STANLIB OFFSHORE UNIT TRUSTS				
Share Class(A, B1)*				
STANLIB Euro Cash Fund	A	EUR		
STANLIB Sterling Cash Fund	A	GBP		
STANLIB US Dollar Cash Fund	A	USD		
STANLIB Global Bond Fund		USD		
STANLIB Global Balanced Cautious Fund		USD		
STANLIB Global Balanced Fund		USD		
STANLIB Global Equity Fund		USD		
STANLIB European Equity Fund		EUR		
STANLIB Global Emerging Markets Fund		USD		
STANLIB Global Property Fund		USD		
STANLIB Multi-Manager Global Bond Fund		USD		
STANLIB Multi-Manager Global Equity Fund		USD		
STANDARD BANK INTERNATIONAL FUNDS LIMITED				
Share Class (B or C)*				
Multi-Manager Global Balanced Fund		USD		
Multi-Manager Global Balanced Fund		GBP		
Multi-Manager Global Equity Fund		USD		
Multi-Manager Global Equity Fund		GBP		
MELVILLE DOUGLAS				
Melville Douglas Global Growth Fund Limited - USD Global Growth Fund		USD		
Melville Douglas Select Fund Limited - Global Equity Fund		USD		
Melville Douglas Income Fund Limited - USD Income Fund		USD		
Melville Douglas Income Fund Limited - GBP Income Fund		GBP		

* B1 & C Classes are clean and pay no trail commission. Where fees are not selected we will default to 0%.

EXPECTED FUTURE ACTIVITY

Please provide the following details for any regular payments you anticipate making into the class funds:

Class Name	Currency	Investment Amount	Frequency
1.			
2.			
3.			

BANK DETAILS

Payment by cheque is not accepted. Funds should be transferred and paid in the Class Fund's currency using the banking details listed below:

Currency	Account holding bank	Account number
Sterling (GBP)	Bank Name: Bank of New York Mellon, London SWIFT: IRVTGB2X Sort-Code: 70-02-25 IBAN: GB53IRVT70022554756360	Account Name: STANLIB Subs and Reds Account Number: 54756360 Address: One Canada Square, Canary Wharf, London
US Dollars (USD)	Bank Name: Bank of New York Mellon, New York SWIFT: IRVTUS3N ABA Number: 021000018	Account Name: STANLIB Subs and Reds Account No: 8901158895 Address: 101 Barclay Street, New York, NY 10286, United States



Euro (EUR)	Bank Name:	Bank of New York Mellon, Frankfurt	Account Name:	STANLIB Subs and Reds
	SWIFT:	IRVTDEFX	Account Number:	7714069711
	IBAN:	DE50503303007714069711	Address:	MesseTurm, Friedrich-Ebert-Anlage 49, 60308 Frankfurt am Main, Germany

Please ensure funds are transferred and paid in the Class Fund's currency and please note that third party payments are not permitted.

FATCA/CRS DECLARATION

Intergovernmental tax information exchange agreements exist between Jersey and USA, UK, South Africa and countries who have adopted the Common Reporting Standards. Personal account holders should expect that their personal and account information will be exchanged with the Jersey tax authority and thereafter any tax authority in which they have tax residence. **Note: Each Applicant is to complete the Citizenship and Tax details sections in full.**

FIRST APPLICANT

CITIZENSHIP DETAILS

ARE YOU A SOUTH AFRICAN CITIZEN? YES NO IF YES, PLEASE PROVIDE YOUR IDENTITY NUMBER

ARE YOU A USA CITIZEN? YES NO

TAX DETAILS

ARE YOU A REGISTERED TAX PAYER? YES NO

ARE YOU A REGISTERED TAX PAYER IN THE USA? YES NO

ARE YOU A REGISTERED TAX PAYER IN MULTIPLE COUNTRIES? YES NO

If 'YES', to any of the above, please list all countries (including South Africa) in which you are resident for tax purposes and provide the associated tax identification numbers in the table below. By ticking 'Not Applicable' you confirm that the country specified does not issue a Tax Identification Number.

Country(ies) of Tax Residency	Tax Identification Number	Not Applicable
1.		<input type="checkbox"/>
2.		<input type="checkbox"/>
3.		<input type="checkbox"/>

SECOND APPLICANT

*Additional forms for applicants three and four may be requested from offshorequeries@stanlib.com

CITIZENSHIP DETAILS

ARE YOU A SOUTH AFRICAN CITIZEN? YES NO IF YES, PLEASE PROVIDE YOUR IDENTITY NUMBER

ARE YOU A USA CITIZEN? YES NO

TAX DETAILS

ARE YOU A REGISTERED TAX PAYER? YES NO

ARE YOU A REGISTERED TAX PAYER IN THE USA? YES NO

ARE YOU A REGISTERED TAX PAYER IN MULTIPLE COUNTRIES? YES NO

If 'YES', to any of the above, please list all countries (including South Africa) in which you are resident for tax purposes and provide the associated tax identification numbers in the table below. By ticking 'Not Applicable' you confirm that the country specified does not issue a Tax Identification Number.

Country(ies) of Tax Residency	Tax Identification Number	Not Applicable
1.		<input type="checkbox"/>
2.		<input type="checkbox"/>



Country(ies) of Tax Residency	Tax Identification Number	Not Applicable
3.		<input type="checkbox"/>

APPLICATION PAYMENT BANK DETAILS

Please indicate where the monies are being paid or transferred from. Please note that STANLIB Fund Managers Jersey Limited does not accept third party payments.

BANK NAME												
BRANCH		SWIFT/SORT/ BRANCH CODE										
ADDRESS												
ACCOUNT NUMBER												
ACCOUNT NAME												
SOURCE OF FUNDS												
SOURCE OF WEALTH												

Note: Unless you are utilising STANLIB for the foreign currency conversion, please ensure all payment instructions are sent directly to the transferring bank and not to STANLIB. STANLIB will take no responsibility for forwarding any original payment instructions received with the application.

REDEMPTION PAYMENT BANK DETAILS

Please indicate where you will require proceeds to be sent to on withdrawal. Please note that proceeds will be sent by Electronic Bank Transfer. STANLIB Fund Managers Jersey Limited does not make third party payments.

BANK												
BRANCH		SWIFT/SORT /BRANCH CODE										
ADDRESS												
ACCOUNT NUMBER												
ACCOUNT HOLDER'S ID NUMBER												
ACCOUNT NAME												

INVESTOR SIGNING AUTHORITY

FOR JOINT ACCOUNTS, PLEASE TICK THE BOX IF YOU WISH THE MANAGER TO ACCEPT INSTRUCTIONS FROM ANY ONE PARTY. IF THE BOX IS NOT TICKED, ALL PARTIES WILL BE REQUIRED TO EXECUTE ALL INSTRUCTIONS GIVEN TO THE MANAGER

YES

If you wish for any other specific instructions to apply, please provide a separate instruction with this application form.

VALUATIONS

Please tick the currency in which you would like to receive your valuations. **If no currency is selected, we will default to SA RAND.**

CURRENCY FOR VALUATIONS USD GBP EUR SA RAND



DECLARATION FOR PERSONAL INFORMATION, SECURITY AND PRIVACY

The Applicant confirms that the Applicant has permission to disclose to STANLIB the personal information of any dependent or beneficiary provided in this application form. The Applicant agrees that the information provided will apply to all products and/or services whereby the Applicant has entered into an agreement with STANLIB or any of its affiliates. The Applicant agrees that STANLIB, its representatives, contracted third party service providers and any appointed financial adviser(s), including those in foreign jurisdictions, may collect, disclose or otherwise process the Applicant's personal information for the purposes of providing the Applicant with products and/or services which the Applicant has requested from STANLIB.

The Applicant understands that any information it provides in relation to any natural person (a "relevant Applicant") in this application form by whatever means in relation to an application for units in the Fund or information which may be obtained in relation to any relevant Applicant from other sources (the "personal data") will be held, controlled and processed by the Trustee/Custodian and the Manager and their respective associates as "data controllers" for the purposes of (as applicable) (i) the General Data Protection Regulation (2016/679) and any national law issued under that regulation, and (ii) the Data Protection (Jersey) Law 2018, each as amended from time to time (together, the "DP Laws"). The Applicant is advised to read in detail the Privacy and Security Statement at <http://www.stanlib.com/Pages/PrivacyandSecurity.aspx>, which provides an outline of the Applicant's data protection rights and the manner and purposes for which personal data relating to relevant Applicants may be processed by or on behalf of the Trustee/Custodian and the Manager and their respective associates under the DP Laws as they relate to the Applicant.

The Applicant warrants and confirms that:

- (a) it has all necessary authority to provide the personal data on behalf of each relevant Applicant;
- (b) it has and shall continue to comply in all respects with the DP Laws in relation to the disclosure of personal data pursuant to this application form; and
- (c) it will make the Data Protection Notice available to each relevant Applicant and draw their attention to it.

STANLIB undertakes to only process the Applicant's personal information as permitted by law or when STANLIB is required by law to collect and process the Applicant's personal information. STANLIB may also process or share the Applicant's personal information if required for the purposes of law enforcement or to combat money laundering and fraud. STANLIB will take reasonable steps to ensure that all personal information about the Applicant(s), their dependents or beneficiaries will be kept secure and confidential, whether processed by STANLIB or third parties, and will only be kept for as long as required or prescribed by law. In some instances, STANLIB may be required to collect or process the Applicant's personal information in order to service products or conduct research. Where appropriate, this information will be de-identified such that it cannot be linked back to the Applicant individually.

The Applicant is entitled to request access to, update or rectify the Applicant's personal information at any time. Should the Applicant's personal details change, he/she is required to notify STANLIB through his/her appointed financial adviser, or directly by calling the contact centre on 0860 123 003 within 30 days of the changes or +27(0)11 448 5000. The Applicant can make certain changes to their profile online via our secure web portal (www.stanlib.com).

SIGNATURES AND DECLARATIONS

I/We understand that this application is subject to the current Prospectus of the funds, as amended from time to time. I/We confirm that I/We have read and understand the relevant Prospectus pertaining to this investment. I/We warrant that the information contained herein is true and correct, and that, where this application is signed in a representative capacity, I/we have the necessary authority to do so and that this transaction is within my/our power.

I/We confirm that I/we are contracting as principal with the relevant fund (acting through the Manager as appropriate). I/We declare that I/We are not a resident/residents of the United States of America and that I/We are not holding and will not hold shares in the fund(s) for or on behalf of an individual or individuals so resident or a US person or persons. ("U.S. Person" is defined in the Prospectuses). I/We acknowledge and understand that the funds are for unit holders/shareholders who understand the inherent risks associated with such investments.

I/We acknowledge and agree that the Manager, at their absolute discretion, have the right to refuse any application for shares/units in whole or in part without providing an explanation in line with the legislative and regulatory requirements. I/We confirm that I/we will provide all the details and documentation requested in accordance with the Managers KYC I Due Diligence requirements as detailed in the relevant Prospectus pertaining to this investment. I/We also agree and authorise you to make any enquiries you deem necessary in order to verify the information contained in this application. I/We acknowledge that the contract note evidencing the issue of units/shares to me/us will not be issued until all documentary evidence requested by the Manager in order to full its obligations pursuant to applicable Anti Money Laundering legislation has been provided to the Managers satisfaction. I/We acknowledge that the Manager may not be able to effect a redemption request if documentary evidence relevant to that investment as requested by the Manager in order to fulfil its obligations pursuant to applicable Anti Money Laundering legislation in Jersey has not been provided. I/We agree that the Manager will not be liable for any losses suffered, (for example as a consequence of losses on redemption) by me/us due to any delay in obtaining documentation it requires from me/us. I/We warrant that all funds invested with STANLIB Fund Managers Jersey Limited are not the proceeds of unlawful activities and warrant that I/we have not contravened any anti-money laundering legislation and regulation applicable to me/us.

Electronic transfer of information and in particular, e-mail communication cannot be guaranteed to be secure or virus or error free. It can be intercepted, lost, corrupted and be delivered late or incomplete. By signing this application I/We accept the risks of such communication and hereby authorise electronic communication between us in the full knowledge and understanding of all the risks associated with e-mail communication. I/We agree to adopt reasonable procedures to check for and prevent the transmission of viruses prior to sending information electronically. I/We shall each be responsible for protecting our own systems and interests in relation to communicating electronically and neither the Manager or me/us (and in each case their respective directors, partners, employees, agents or servants and trustees) shall have any liability to each other on any basis (including negligence) in respect of any error, damage or loss or omission arising from or in connection with the electronic communication of information between us and the Managers/Administrators reliance upon such information. I/We confirm that I/we have read and understood the declarations as per this application form and agree to be bound by it, prior to completing this form.

I/We acknowledge that where advice is rendered in South Africa, VAT will be levied on initial and ongoing advice fees and will be deducted from our portfolio or portfolios. I/We confirm that I/we understand the risk profile of these investments and that it is my/our obligation to familiarise myself/ourselves with and accept the risks associated with these investments. I/We acknowledge that my/our personal and account information will be exchanged with the Jersey tax authority and thereafter any tax authority in which I/We have tax residence. The mandate over the holding is that notified to the Manager on this application, or subsequently received in writing.



SIGNATURE OF FIRST HOLDER/ AUTHORISED SIGNATORY		DATE	<table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td style="text-align: center;">D</td><td style="text-align: center;">D</td></tr> </table> - <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td style="text-align: center;">M</td><td style="text-align: center;">M</td></tr> </table> - <table border="1" style="display: inline-table; border-collapse: collapse;"> <tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr> <tr><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td><td style="text-align: center;">Y</td></tr> </table>			D	D			M	M					Y	Y	Y	Y
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INTERMEDIARY DECLARATION

I/We, the Intermediary hereby confirm that I have satisfied myself as to the identity of the Applicant(s) and that I attach all the relevant certified KYC documentation to this form.

I/We acknowledge that for higher risk business further AML/CDD documentation may be requested. I/We also acknowledge that where scanned documentation is unclear, originals will be made available to the Manager or Administrator before the deal is captured.

I/We confirm we have made the applicant(s) aware of the Groups Offshore Banking capabilities and have made the appropriate direct referral as necessary.

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