



**A**

## General information

Please use block capitals

Name*:		Social Security Number/Identification Number*:	Company Registration Number*:	
SKAGEN account*:	Tax residency*:	E-mail*:	Telephone*:	

\*Mandatory fields

**B**

## Please subscribe units in the following funds

Fund	Amount	Currency*

Clients are responsible for making sure that payment is made in the correct currency to the correct account using the relevant IBAN and SWIFT or account number.

Please refer to the "Settlement details" form for further account information.

\*Currencies: NOK, SEK, DKK, EUR, GBP, USD, CHF

**C**

## Purpose of the subscription and source of funds/assets **NB: Selection required**

### 1. What is the time horizon for your investment? (Only one of the options can be selected)

- Short-term (less than 1 year)  
  Medium-term (1 - 5 years)  
  Long-term (more than 5 years)

### 2. What amount do you expect to invest each year\*? (Only one of the options can be selected)

For private persons:

- Less than 10 000 kr/1.000 EUR  
  10 000-150 000 kr/1.000 - 15.000 EUR  
  150 000-1 000 000 kr/15.000 - 100.000 EUR  
 More than 1 000 000 kr/100.000 EUR

For entities:

- Less than 10 000 kr/1.000 EUR  
  10 000-150 000 kr/1.000-15.000 EUR  
  150 000-1 000 000 kr/15.000-100.000 EUR  
 1 000 000-5 000 000 kr/100.000-500.000 EUR  
  5 000 000-10 000 000 kr/500.000-1.000.000 EUR  
 More than 10 000 000 kr/1.000.000 EUR

\* Or equivalent value in your chosen investment currency

### 3. How frequently will you invest in our funds? (Only one of the options can be selected)

- Multiple times each month  
  Once a month  
  4 - 8 times per year  
  1 - 3 times per year  
  Less than once a year

### 4. Where do the assets that you are investing originate from? (Only one of the options can be selected)

For private persons:

- Previous savings  
  Salary/pension  
  Inheritance/gift  
  Sale of home or property  
 Other, please specify: \_\_\_\_\_

For entities:

- Operating profit  
  Sale of business/real estate  
  Premium  
  Return on previous investment  
 Other, please specify: \_\_\_\_\_

### 5. What is the purpose of your investment? (Only one of the options can be selected)

For private persons:

- Pension saving  
  Short-term saving  
  Saving on behalf of close family/others  
  Other long-term saving  
 Other, please specify: \_\_\_\_\_

For entities:

- Pension saving  
  Management of excess liquidity  
  Security trading is included in the company's operations  
 Foundation/charity management  
  Other, please specify: \_\_\_\_\_



## D

### Politically Exposed Person (PEP) NB: Selection required

**1. For private persons:** Are you or have you been entrusted with a prominent function, or are you a immediate family member or close associate of such a person\*?

**2. For entities:** Are persons who act on behalf of the company / given the right to dispose of the account, the beneficial owner (persons listed under point E), as well as close family members or known employees of these to be regarded as PEP?

No

Yes, please specify (both name and relation must be stated): \_\_\_\_\_

For more information about PEP, please refer to information on page 7 and Art. 3 (9) AML4 Directive (EU) <https://eur-lex.europa.eu/>

### FATCA status NB: Selection required

I hereby certify that I am not a U.S. citizen.

I hereby certify that I am a U.S. citizen.

## E

### Information about beneficial owners

**1. For private persons:** If you execute the transaction on behalf of for the benefit of another person than the account holder, please fill in the fields below:

Social Security Number/TIN (Tax ID No)*:	Last name*:	First name*:	
Address*:		Postal code & City*:	
Politically exposed person (PEP)*: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify:	Citizenship*:		Double citizenship (if applicable):
Place of birth*:	Date of birth (ddmmyyyy)*:	Sex*:	

### Information with respect to all countries of residence for tax purposes of the beneficial owner:

Country of Tax Residence\*: \_\_\_\_\_ Taxpayer Identification Number (TIN)/Equivalent:  Country does not issue TIN/Equivalent

Country of Tax Residence\*: \_\_\_\_\_ Taxpayer Identification Number (TIN)/Equivalent:  Country does not issue TIN/Equivalent

**2. For entities:** If you execute the transaction on behalf of a legal person please fill in the fields below If there are any natural persons who directly or indirectly, alone or together with close family, owns or controls more than 25% of the company:

Beneficial Owner No. 1			
Social Security Number*:	Last name*:	First name*:	
Address*:	Postal code & City*:	Ownership in %:	Voting rights in %:
Politically exposed person (PEP)*: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify:	Citizenship*:		Double citizenship (if applicable):
Place of birth*:	Date of birth*:	Sex*:	

# Subscription form



UK: (0) 207 408 2500; INT: +47 51803900; DE: +49 160 90 866 555

fund@skagenfunds.com



## E Information with respect to all countries of residence for tax purposes of the Beneficial Owner:

Country of Tax Residence*: _____	Taxpayer Identification Number (TIN)/Equivalent: _____	<input type="checkbox"/> Country does not issue TIN/Equivalent
Country of Tax Residence*: _____	Taxpayer Identification Number (TIN)/Equivalent: _____	<input type="checkbox"/> Country does not issue TIN/Equivalent

\*Mandatory fields

Beneficial Owner No. 2			
Social Security Number*:	Last name*:	First name*:	
Address*:	Postal code & City*:	Ownership in %:	Voting rights in %:
Politically exposed person (PEP)*: <input type="checkbox"/> No <input type="checkbox"/> Yes, please specify:	Citizenship*:	Double citizenship (if applicable):	
Place of birth*:	Date of birth*:	Sex*:	

## F Information with respect to all countries of residence for tax purposes of the Beneficial Owner:

Country of Tax Residence*: _____	Taxpayer Identification Number (TIN)/Equivalent: _____	<input type="checkbox"/> Country does not issue TIN/Equivalent
Country of Tax Residence*: _____	Taxpayer Identification Number (TIN)/Equivalent: _____	<input type="checkbox"/> Country does not issue TIN/Equivalent

\*Mandatory fields

## F Personal Information

SKAGEN performs the collection, storage and distribution of collected and registered personal data. The purpose of processing data is to manage securities funds, market securities, and to comply with disclosure requirements in accordance with prevailing regulations. When you are a customer of SKAGEN, we are required by law to register certain types of personal data about you, such as your name, date of birth, national identity number, and residential address. When employees of SKAGEN offer investment services, we are required by law to record all telephone conversations, and document any other customer communication such as email and chat conversations. We have the right to send you electronic marketing, but you can at any time opt out of this. SKAGEN uses data processors and other business partners in its daily operations. SKAGEN is part of the Storebrand Group. You can choose whether your personal data and other information may be shared internally within the Group. To find out more about privacy and exercising your rights, please visit [www.skagenfunds.com/privacy-policy](http://www.skagenfunds.com/privacy-policy)

Storebrand consists of various companies providing services within saving, insurance and banking. I agree that other companies in the Storebrand Group may use information about me across the companies, to provide the best possible client service, tailored product recommendations and offers. The information is only shared between the Storebrand companies, and does not include special categories of personal data.

YES  NO

The other Storebrand Group companies can send me personalized marketing in digital channels.

E-mail and SMS  YES  NO  
Social media and external websites  YES  NO

You are entitled to withdraw your consent at any time via SKAGEN's web portal or by contacting [personvernombud@skagenfondene.no](mailto:personvernombud@skagenfondene.no).



## G

### Signing

The undersigned hereby confirms that I have examined and accepted the contents of the fund's key investor information document, SKAGEN's General Commercial Terms as well as the conditions set out in this form (4 pages). I hereby authorise SKAGEN to make the KIIDs available to me on its web pages. The KIIDs and General Commercial Terms may be found on [www.skagenfunds.com](http://www.skagenfunds.com).

By signing this form I/we confirm that the account holder/beneficial owner is not resident in the United States.

**For entities:** For persons carrying out transactions on behalf of the entity, all fields below must be filled in. In addition a certified copy of valid identification for the person(s) signing this form must be attached (if not provided earlier).

Name*:	Social Security Number*:	
Place of birth:	Date of birth (dd.mm.yyyy):	Sex:
Address*:	Postal code & City*:	
Place & Date*:	Signature*:	

Name*:	Social Security Number*:	
Place of birth:	Date of birth (dd.mm.yyyy):	Sex:
Address*:	Postal code & City*:	
Place & Date*:	Signature*:	

\*Mandatory fields



**Please send complete and signed form by post to:**  
**SKAGEN Funds, P.O. Box 160, 4001 Stavanger, Norway**

**or by e-mail to:**

**fund@skagenfunds.com**

**UK clients please cc: contact@skagenfunds.co.uk**

### Costs

There are no costs related to the subscription or redemption of units in SKAGEN's funds.

Costs related to your client relationship in SKAGEN is set out in SKAGEN's General Commercial Terms, as they apply at all times.

For further cost information for the countries in which SKAGEN is authorised to market its funds, please visit [www.skagenfunds.com](http://www.skagenfunds.com).

Please refer to the "Settlement details" form for further account information.



#### Important information

All information and documentation referred to below must be delivered to SKAGEN before orders from new clients may be processed.

- 1) Fully completed form
- 2) Certified copy of valid passport or national identity card issued within the EEA
- 3) Copy of letter from authorities, bank account, phone bill or similar document stating your name in combination with your address, date of birth or bank account number

#### Certified copy

A bank, post office, government department, insurance company, lawyer, auditor, accountant or real estate broker may certify a true copy.

If the document is sent to SKAGEN by e-mail, the sender must be the entity that has certified the true copy. If you as a client wishes to send the confirmation yourself, the original document can then only be sent to SKAGEN by post.

Clients will receive the relevant unit price on the day payment is credited to the fund's bank account, provided that SKAGEN has received all the documentation/information necessary to carry out the customer control. The subscription form(s) should be sent by e-mail or post along with payment.



#### Internet portal "My Page"

As a SKAGEN Funds client you may use our web portal My Page. The portal provides tailored information and reports on your holdings in SKAGEN. You may also use the service to check the number of units registered with your account.

To access My Page you will need a user name and a password. Your user name is your email address registered with SKAGEN. The first time you log on to the My Page portal, you must register as a new user in order to obtain a password. You register by clicking on the Register as user link. You will then order a one-time code/one-time password which will be sent to you immediately by email.

### The art of common sense

Historical returns are no guarantee for future returns. Future returns will depend, inter alia, on market developments, the fund manager's skill, the fund's risk profile and management fees. The return may become negative as a result of negative price developments.