
Dimensional Funds ICVC Application Form

Please fill in this form in **BLOCK CAPITALS**, making sure that all parties sign section 13, and return it to:

Dimensional Fund Advisors Ltd, PO Box 12719, Chelmsford, CM99 2EZ, UK Fax - 0330 123 3755, international Fax - +44 1268 457731, Tel - 0370 7070073. Telephone calls may be recorded.

IMPORTANT NOTES

- If the required anti-money laundering documentation is not received, share redemption proceeds/dividends may not be paid out.
- Applications for shares may be accepted electronically in certain circumstances where specifically agreed to in advance.
- Before you invest, please read the Key Investor Information Document ("KIID") or the Packaged Retail and Insurance-based Investment Products Key Information Document ("PRIIP KID"), as applicable, for the share class in which you wish to invest and the prospectus for the Fund (the "Prospectus"). To ensure you have the most recent versions, please visit <https://www.dimensional.com/gb-en/funds>.
- The ACD reserves the right, in its sole discretion, to close without notice, any account that has been at zero balance for a period of 12 months or longer from the point of the last transaction in the account.

1. APPLICANT DETAILS

Private investors should provide their details here and details of their financial adviser (if applicable) in section 4. Shares may be registered in a single name or joint names. "Care of" and PO Boxes will not be accepted.

Non-personal entities (such as institutions, corporations, and trusts) should provide their contact details here and their registration details in section 2. "Care of" and PO Boxes will not be accepted.

PERSONAL DETAILS

FORENAME(S)

SURNAME

TITLE

DATE OF BIRTH

NATIONALITY

ADDRESS

COUNTRY

POSTCODE

If acting in a trustee capacity, please tick here

TEL

FAX

JOINT HOLDER 3 DETAILS

FORENAME(S)

SURNAME

TITLE

DATE OF BIRTH

NATIONALITY

ADDRESS

COUNTRY

POSTCODE

If acting in a trustee capacity, please tick here

TEL

FAX

JOINT HOLDER 2 DETAILS

FORENAME(S)

SURNAME

TITLE

DATE OF BIRTH

NATIONALITY

ADDRESS

COUNTRY

POSTCODE

If acting in a trustee capacity, please tick here

TEL

FAX

JOINT HOLDER 4 DETAILS

FORENAME(S)

SURNAME

TITLE

DATE OF BIRTH

NATIONALITY

ADDRESS

COUNTRY

POSTCODE

If acting in a trustee capacity, please tick here

TEL

FAX

1. APPLICANT DETAILS (CONTINUED)

DETAILS OF EXPECTED INVESTMENT

Level of expected total investment (tick appropriate box):

- Ranging between a currency equivalent to GBP 0 to GBP 15K
- Ranging between a currency equivalent to GBP 15K to GBP 100K
- Ranging between a currency equivalent to GBP 100K to GBP 1M
- Ranging between a currency equivalent to GBP 1M to GBP 100M
- Greater than a currency equivalent to GBP 100M

Detail of investment (tick appropriate box):

- Investing on my/our own behalf (please tick the box if applicable)
- Investing on behalf of a Third Party Disclosed in the Investor Name
- Investing on behalf of a Third Party Not Disclosed in the Investor Name
- Investing on behalf of several non-disclosed Third Parties (omnibus/pooled accounts)
- Dividends or Company Profits
- Divorce
- Maturity/Surrender of Life Assurance
- Other Court Award (compensation)
- Savings

SOURCE OF FUNDS FOR INITIAL INVESTMENT (PLEASE TICK MULTIPLE BOXES IF APPROPRIATE):

- | | | |
|---|--|--|
| <input type="checkbox"/> Dividends or Company Profits | <input type="checkbox"/> Salary | <input type="checkbox"/> Sale of assets (please specify):
_____ |
| <input type="checkbox"/> Divorce | <input type="checkbox"/> Gift | <input type="checkbox"/> Other (please specify)
_____ |
| <input type="checkbox"/> Maturity/Surrender of Life Assurance | <input type="checkbox"/> Pension | |
| <input type="checkbox"/> Other Court Award (compensation) | <input type="checkbox"/> Lottery | |
| <input type="checkbox"/> Savings | <input type="checkbox"/> Sale of Business | |
| <input type="checkbox"/> Inheritance | <input type="checkbox"/> Investment Income | |

Further supporting documentation may be requested if deemed necessary to verify the above information.

SOURCE OF WEALTH, I.E., AGGREGATION OF ACCUMULATED WEALTH (PLEASE TICK MULTIPLE BOXES IF APPROPRIATE):

- | | | |
|--|----------------------------------|--|
| <input type="checkbox"/> Inheritance | <input type="checkbox"/> Gift | <input type="checkbox"/> Sale of Business |
| <input type="checkbox"/> Salary | <input type="checkbox"/> Pension | <input type="checkbox"/> Investment Income |
| <input type="checkbox"/> Sale of assets (please specify):
_____ | <input type="checkbox"/> Lottery | <input type="checkbox"/> Other (please specify)
_____ |

Further supporting documentation may be requested if deemed necessary to verify the above information.

2. REGISTRATION DETAILS FOR NON-PERSONAL ENTITIES ONLY

("CARE OF" AND PO BOXES WILL NOT BE ACCEPTED)

REGISTERED NAME		REGISTERED NAME OF COMPANY (IF APPLICABLE)	
DESIGNATION		LEGAL ENTITY IDENTIFIER (LEI)	
ADDRESS		CORRESPONDENCE ADDRESS (IF DIFFERENT)	
		PRINCIPAL PLACE OF BUSINESS ADDRESS (IF DIFFERENT)	
COUNTRY	POSTCODE	COUNTRY	POSTCODE
TEL	FAX	TEL	FAX
EMAIL		EMAIL	

CORPORATE SUB TYPE

- | | |
|--|---|
| Regulated Financial Institution | Lawyers/Accountants and others acting in a professional capacity (non-FCA Regulated), including LLP's |
| Nominees | Clubs, societies (other than registered charity or trust) |
| Trusts | Sovereign Wealth Funds |
| Regulated or Registered UK & Irish occupational pension schemes - SSAS | Parochial Church Councils (other than registered charity or trust) |
| Regulated or Registered UK & Irish personal pension schemes | Listed public company |
| Local Authority Pension Schemes | Distributor |
| Unregulated or unregistered pensions | Platform |
| Registered Charities - Incorporated | Custodian |
| Registered Charities - Unincorporated/Trust | Sole Trader Public |
| Unregistered Charities | Other (please describe) |
| PLC | |
| Private Corporates | |
| Independent Schools/Colleges/Universities (other than registered charity or trust) | |
| State Owned Entity | |
| Other partnerships/unincorporated businesses | |

Please refer to section G2 for guidance on documentary requirements that will need to be submitted.

3. FINANCIAL INSTITUTIONS

This section must be completed if you are a Financial Institution authorised and regulated for anti-money laundering purposes acting on your own behalf:

Please tick the following box, if appropriate.

I am/We are a bank/provider of financial services or a nominee company/nominee account which is itself or is a part of/used by a bank/ provider of financial services authorised and regulated for anti-money laundering purposes:

YES NO

If Yes:

NAME OF REGULATED ENTITY

NAME OF REGULATOR

REGISTRATION / LICENSE NUMBER

If you are not a regulated Financial Institution please refer to section G2 for guidance on documentary requirements.

4. DETAILS OF PROFESSIONAL FINANCIAL ADVISER – OBLIGATORY FOR PRIVATE INVESTORS ONLY:

DETAILS OF YOUR FINANCIAL ADVISER

COMPANY NAME AND ADDRESS

ADVISER'S NAME

ADVISER'S FINANCIAL CONDUCT AUTHORITY (OR OTHER REGISTRATION NUMBER)

TEL

FAX

REGULATED BY

EMAIL

5. SELF-CERTIFICATION REQUIREMENT

Tax Regulations* require us to collect information about each investor's tax residency. In certain circumstances (including if we do not receive a valid self-certification from you) we may be obliged to share information on your account with HMRC. If you have any questions about your tax residency, please contact your tax advisor. Should any information provided change in the future, please ensure you advise us of the changes promptly.

Self-certification forms are attached to this Dimensional Funds ICVC Application Form. Please tick the box for which form you are completing:

Entity Self-Certification
Individual Self-Certification Form

* The term "tax regulations" refers to regulations created to enable automatic exchange of information and includes FATCA , various Agreements to Improve International Tax Compliance entered into between the UK and its Crown Dependencies and its Overseas Territories, and the OECD Common Reporting Standard for Automatic Exchange of Financial Account Information.

6. INTERMEDIARIES, AGENTS AND NOMINEES

This section must be completed if you are an intermediary/agent/nominee authorised and regulated for anti-money laundering purposes in an approved country (as defined in the attached Guidance Notes) acting on behalf of a third party. Please sign below.

TO BE COMPLETED BY INTERMEDIARY/AGENT/NOMINEE

I/WE (NAME AND ADDRESS OF AGENT/INTERMEDIARY)

CONFIRM THAT WE ARE REGULATED IN (INSERT JURISDICTION)

BY (NAME OF REGULATOR)

We undertake to verify the identity of all third parties on whose behalf we purchase shares in the Fund. We further undertake to retain for five years from the date the subscriber fully redeems from the Fund copies of any documentation obtained by us in so verifying and if/when requested to do so by the Fund and/or Registrar, provide copies of said documentation.

SIGNED

By signing this Application Form the signatory confirms that he/she is duly authorised to sign this declaration on behalf of the intermediary/agent/nominee.

If you are not a regulated Financial Institution please refer to section G2 for guidance on documentary requirements.

7. ACCOUNT CURRENCY REQUIREMENTS

Separate accounts are required for both GBP and EUR currency holdings and trades.

Please confirm whether you would like to open (tick the appropriate box):

- GBP account (see section 8)
- EUR account (see section 9)
- Both a EUR and a GBP account (see both section 8 & 9)

If you do not open both accounts at this time you may be required to submit a further application before investing in another currency in the future.

8. FUND PAYMENT DETAILS - GBP

Once the account has opened and you have placed an initial deal, please use the relevant currency bank account details to settle purchases in the Funds. Please note settlement must be received in the currency of the share class. Cleared funds must be received by close of business on the third Business Day after the deal has been placed.

GBP PAYMENT DETAILS

Correspondent Bank	Citibank, N.A., London Branch
Bank Swift Code	CITIGB2L
Sort Code	18-50-08
Account Name	DFAL GBP Dealing Account
Account Number	11291807
IBAN	GB26CITI18500811291807
Currency	GBP
Reference	Name of Fund Applicant

Please note, payment should be made by bank transfer net of all bank charges (i.e. at investor expense). For international wire transfers, the transfer should be made using the 'OUR' instruction in the SWIFT message instruction at field 71A "Details of Charges". The 'OUR' instruction means that the full investment amount is transferred to the fund and in addition you may incur associated wire transfer charges which are payable to your bank.

Subscription in the form of cheques will not be accepted without express prior consent from the ACD.

YOUR BANK ACCOUNT DETAILS FOR REDEMPTION PROCEEDS AND GBP INCOME PAYMENTS

PLEASE NOTE THAT SUBSCRIPTIONS MUST BE SENT FROM / REDEMPTION PROCEEDS PAID TO THE BANK ACCOUNT OF THE INVESTOR. PAYMENTS WILL NOT BE MADE TO THIRD PARTY ACCOUNTS.

Please provide your bank account details below. Note: the bank account name must be the same as the applicant name. If investing in Income Shares, income will be paid to the details in section a), unless section b) is also completed.

(a) Please send the proceeds of any future share redemptions to the bank account detailed below. Income payments should be paid to the same details unless section b) is also completed. You may release the proceeds of any and all redemption orders directly to the settlement bank account (without the need for the account holder to send any further instruction such as a renunciation form).

<hr/> BANK / BUILDING SOCIETY NAME AND ADDRESS	<hr/> ACCOUNT NAME
<hr/> POSTCODE	<hr/> IBAN
<hr/> BIC CODE	<hr/> ACCOUNT NUMBER
<hr/> REFERENCE / FOR FURTHER CREDIT	<hr/> BRANCH SORT CODE

AND / OR

(b) We are investing in Income Shares, and we wish for income payments to be paid to the bank account outlined below:

<hr/> BANK / BUILDING SOCIETY NAME AND ADDRESS	<hr/> ACCOUNT NAME
<hr/> POSTCODE	<hr/> IBAN
<hr/> BIC CODE	<hr/> ACCOUNT NUMBER
<hr/> REFERENCE / FOR FURTHER CREDIT	<hr/> BRANCH SORT CODE

9. FUND PAYMENT DETAILS - EUR

Once the account has opened and you have placed an initial deal, please use the relevant currency bank account details to settle purchases in the Funds. Please note settlement must be received in the currency of the share class. Cleared funds must be received by close of business on the third Business Day after the deal has been placed.

EUR PAYMENT DETAILS

Correspondent Bank	Citibank Europe PLC
Corresponding BIC	CITIE2X
Beneficiary Bank	Citibank, N.A., London Branch
Beneficiary BIC	CITIGB2L
Account Name	DFAL EUR Dealing Account
IBAN	GB94CITI18500811291068
Currency	EUR
Reference	Name of Fund Applicant

Please note, payment should be made by bank transfer net of all bank charges (i.e. at investor expense). For international wire transfers, the transfer should be made using the 'OUR' instruction in the SWIFT message instruction at field 71A "Details of Charges". The 'OUR' instruction means that the full investment amount is transferred to the fund and in addition you may incur associated wire transfer charges which are payable to your bank.

Subscription in the form of cheques will not be accepted without express prior consent from the ACD.

YOUR BANK ACCOUNT DETAILS FOR REDEMPTION PROCEEDS AND EUR INCOME PAYMENTS

PLEASE NOTE THAT SUBSCRIPTIONS MUST BE SENT FROM / REDEMPTION PROCEEDS PAID TO THE BANK ACCOUNT OF THE INVESTOR. PAYMENTS WILL NOT BE MADE TO THIRD PARTY ACCOUNTS.

Please provide your bank account details below. Note: the bank account name must be the same as the applicant name. If investing in Income Shares, income will be paid to the details in section a), unless section b) is also completed.

- (a) Please send the proceeds of any future share redemptions to the bank account detailed below. Income payments should be paid to the same details unless section b) is also completed. You may release the proceeds of any and all redemption orders directly to the settlement bank account (without the need for the account holder to send any further instruction such as a renunciation form).

BANK / BUILDING SOCIETY NAME AND ADDRESS	ACCOUNT NAME
POSTCODE	IBAN
BIC CODE	ACCOUNT NUMBER
REFERENCE / FOR FURTHER CREDIT	BRANCH SORT CODE

AND / OR

- (b) We are investing in Income Shares, and we wish for income payments to be paid to the bank account outlined below:

BANK / BUILDING SOCIETY NAME AND ADDRESS	ACCOUNT NAME
POSTCODE	IBAN
BIC CODE	ACCOUNT NUMBER
REFERENCE / FOR FURTHER CREDIT	BRANCH SORT CODE

10. ANTI-MONEY LAUNDERING REQUIREMENTS

Due to anti-money laundering requirements operating in various jurisdictions, all investors (both individual applicants and corporate entities) are required to be identified. Please refer to section G2 Guidance Notes in order to review the documentation you are required to supply.

11. DECLARATIONS

Please read the following declaration and if you agree with the clauses, sign and date the Application Form in section 13.

- I/We confirm that I/we have read the current Prospectus and kept a hardcopy for my/our records. The application is made upon and subject to the terms of the current Dimensional Funds ICVC Prospectus which is available upon request together with the latest Annual or Interim Report.
- I/We hereby acknowledge and confirm that I/we will obtain the Key Investor Information Document ("KIID") / Packaged Retail and Insurance-based Investment Products Key Information Document ("PRIIP KID"), as applicable, for the sub-fund(s) and class(es) to which any subscription relates in good time prior to completing a subscription form. I/We hereby confirm that for any subsequent investments I/we will obtain and read the latest version of the appropriate KIID/ PRIIP KID prior to each subscription.
- I/We hereby acknowledge that in the future a PRIIP KID for any class(es) of any sub-fund(s) will be provided on <https://www.dimensionalfunds.com/gb-en/funds>, and I/we consent to its receipt in that form for subsequent subscription applications to any class(es) of any sub-fund(s) and understand that a copy of the KIID/ Packaged Retail and Insurance-based Investment Products Key Information Document (PRIIP KID) is available in paper form, free of charge, upon request.
- I/We confirm that I/we have read the attached Guidance Notes and agree to adhere and be subject to its terms.
- Anti-Money laundering: I/We understand that Dimensional Fund Advisors Ltd may require documentary evidence of my/our identity and permanent address and may also use credit reference/information agencies and electronic systems in order to satisfy applicable anti-money laundering regulations. I/We also understand that if Dimensional Fund Advisors Ltd does not receive satisfactory verification, it reserves the right to delay or reject an application or cancel an investment if already made.
- I confirm that I am/we are over the age of 18.
- I/We hereby agree that, notwithstanding anything to the contrary in this application form or the current Prospectus, unless otherwise agreed by Dimensional Fund Advisors Ltd in writing, to the maximum extent permitted by applicable law, to indemnify Dimensional Fund Advisors Ltd and its delegates/ agents including the administrator for any loss arising to Dimensional Fund Advisors Ltd and/or its delegates/agents by reason of them becoming liable to account for tax in any jurisdiction on the happening of a Chargeable Event (as defined in the Prospectus).
- I/We hereby provide my/our consent to Dimensional Fund Advisors Ltd and its delegates/agents disclosing any confidential or personal information to any governmental, regulatory or taxation authority in order for Dimensional Fund Advisors Ltd to comply with legal, regulatory or taxation obligations.
- I/We hereby acknowledge that when I/we apply for shares in a fund there is a window of time between Dimensional Fund Advisors Ltd receiving subscription money and Dimensional Fund Advisors Ltd transferring the subscription money to the Depositary (as defined in the Prospectus) to be used to settle the creation of my/our shares. If Dimensional Fund Advisors Ltd transfers the subscription money to the Depositary by the close of business on the business day following receipt, Dimensional Fund Advisors Ltd is permitted to use an exemption to the FCA Rules (as defined in the Prospectus) which means that Dimensional Fund Advisors Ltd is not required to ensure that money is protected in a ring-fenced bank account. If Dimensional Fund Advisors Ltd transfers the subscription money to the Depositary outside of this window then Dimensional Fund Advisors Ltd is required to protect the money in a ring-fenced bank account in accordance with the FCA Rules.
- I/We confirm that the information provided hereto is, to the best of my/our knowledge, information and belief, accurate and complete and I/we undertake to notify Dimensional Fund Advisors Ltd if any information in this application form changes from the date hereof.
- I/We acknowledge that I/we have read the fund range specific Data Protection Notice located at <https://www.dimensionalfunds.com/gb-en/privacy-policies>.
- I/We acknowledge that we will be responsible for any cancellation or deferral costs incurred by each fund or Dimensional Fund Advisors Ltd in connection with the failure to pay subscription monies by the relevant deadline. Furthermore, Dimensional Fund Advisors Ltd and the Administrator (as well as their legal counsels) may rely on the undertakings, representations, warranties and acknowledgements set out in this Application Form and, to the fullest extent permitted by law, I/we hereby agree to indemnify each of Dimensional Fund Advisors Ltd, the fund and the Administrator and their respective agents, delegates and representatives from and against all claims, liabilities, demands, losses, damages, costs and expenses whatsoever or howsoever arising as a result of, or in connection with, any breach by me/us of such undertakings, representations, warranties or acknowledgements".
- I/We hereby agree to provide any information as may be requested by Dimensional Fund Advisors Ltd to enable each fund in which I am/we are investing to satisfy any legal, regulatory or tax obligations.
- I/We acknowledge that I have been provided with the bank provider's Privacy Statement located at: <https://www.citibank.com/tts/sa/tts-privacystatements/index.html>.

12. DECLARATION OF ULTIMATE ECONOMIC BENEFICIARY OWNER – TO BE COMPLETED WHERE THE REGISTERED ACCOUNT HOLDER IS NOT A NATURAL PERSON

A beneficial owner is considered to be an individual or corporate entity which:

- (a) ultimately owns or controls whether through direct or indirect ownership or control (including through bearer shareholdings) more than 25 per cent of the shares or voting rights in the investor; or
- (b) otherwise exercises controls over the management of the investor

Please complete the following for each beneficial owner where applicable

TITLE AND FULL NAME	PERMANENT RESIDENTIAL	DATE OF BIRTH	CAPACITY (TICK AS APPLICABLE)				
			TRUSTEE	SETTLOR	BENEFICIARY	PROTECTOR	CONTROLLER

Further supporting documentation may be requested if deemed necessary to identify and verify the above information. Please refer to section G2 for guidance on documentary requirements that will need to be submitted.

* Entity Types include (i) individual, (ii) joint account, (iii) publicly-listed company, (iv) state-owned entity, (v) pension fund, (vi) regulated credit and financial institution, (vii) nominee company / intermediary company, (viii) private and unlisted companies, (ix) partnerships, (x) collective investment schemes, (xi) trusts, foundations and similar entities, (xii) charities, (xiii) clubs & societies, (xiv) places of worship, (xv) other (please specify).

13. SIGNATURE(S) OF ALL APPLICANTS OR DULY AUTHORISED SIGNATORIES

Each applicant should sign and date this Application Form.

APPLICANT 1

 FULL NAME

 SIGNATURE

 POSITION

 DATE

APPLICANT 2

 FULL NAME

 SIGNATURE

 POSITION

 DATE

APPLICANT 3

 FULL NAME

 SIGNATURE

 POSITION

 DATE

APPLICANT 4

 FULL NAME

 SIGNATURE

 POSITION

 DATE

G1. GUIDANCE NOTES

FACSIMILE INSTRUCTIONS

The Registrar is 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. If instructions are given by me/us by facsimile I/we undertake to confirm them in writing. I/we hereby agree to indemnify each of the Registrar, Dimensional Funds ICVC, Authorised Corporate Director and agree to keep each of them indemnified against any loss of any nature whatsoever arising to any of them as a result of any of them acting upon facsimile instructions whether or not subsequently confirmed in writing by me/us. The Registrar 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.

ELECTRONIC COMMUNICATIONS

I/we may elect to have notices of annual or extraordinary general meetings, Annual Reports and Audited Accounts, unaudited half-yearly Accounts and confirmations and valuations sent electronically through the Internet to the email address provided by me/us. By electing to use the Internet for this purpose, I/we acknowledge that such electronic transmissions are not encrypted and therefore are insecure and that communication may be lost or changed or altered without the consent of the author. In addition, there are other risks inherent in communicating through the Internet, such as disruptions in service. The Authorised Corporate Director, the Registrar and Dimensional Funds ICVC shall be held harmless in complying with a request to use the Internet as aforesaid and I/we hereby agree to indemnify each of the Authorised Corporate Director, Dimensional Funds ICVC and the Registrar and agree to keep each of them indemnified for any loss, expense, damage, liability or claim (including attorney's fees) incurred or sustained by me/us or any person claiming through me/us as a result of such electronic transmissions.

ANTI-MONEY LAUNDERING

I/we acknowledge that due to anti-money laundering requirements operating within their respective jurisdictions the Registrar may require further verification of my/our identity before the application can be processed and the Registrar and Dimensional Funds ICVC shall be held harmless and indemnified against any loss arising as a result of a failure to process the application if such information as has been required by the parties referred to has not been provided by me/us.

U.S. PERSONS

For purposes of the following paragraph, the term "United States" means the United States, its states, territories or possessions, or an enclave of the United States government, its agencies or instrumentalities. I/We certify that I/we am/are not a U.S. person as defined in Regulation 30.902(k) promulgated under the Securities Act of 1933, as amended, because I/we am/are not:

- A natural person resident in the United States;
- A partnership or corporation organized or incorporated under the laws of the United States;
- An estate of which any executor or administrator is a U.S. person;
- A trust of which any trustee is a U.S. person;
- An agency or branch of a foreign entity located in the United States;
- A non-discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary for the benefit or account of a U.S. person;
- A discretionary account or similar account (other than an estate or trust) held by a dealer or other fiduciary organized, incorporated, or (if an individual) resident in the United States; or
- A partnership or corporation that is:
 - organised or incorporated under the laws of any foreign jurisdiction; and
 - formed by a U.S. person principally for the purpose of investing in securities not registered under the Securities Act of 1933, as amended, unless it is organized or incorporated, and owned, by accredited investors (as defined in § 230.501(a)) who are not natural persons, estates or trusts

I/We agree (i) to provide these representations to the Registrar at such times as they may request, and (ii) to provide on request such certifications, documents or other evidence as the Registrar may reasonably require to substantiate such representations. I/We agree to notify the Registrar immediately if I/we become aware that any of the representations is no longer accurate and complete in all respects and agree immediately either to sell or to tender to Dimensional Funds ICVC for redemption a sufficient number of Shares to allow the representation to be made.

COPIES OF CURRENT PROSPECTUS, ANNUAL OR INTERIM REPORT

A copy of the current Prospectus is available on the internet (together with

latest Annual or Interim Report) at www.dimensionalfunds.com

SIGNING DIRECTIONS

1. To be valid this Application Form must be signed by each 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 who should state his capacity and furnish a certified copy of the authority pursuant to which such official is authorised.
2. In the case of a firm (not a limited company) applications should be in the name(s) of and signed by the proprietor(s).
3. If the Application Form is signed under power of attorney, a copy of the power of attorney must be furnished in support of the signature.
4. An "Intermediary" means a person who:
 - carries on business which consists of, or includes, the receipt of payments, from an investment undertaking, on behalf of other persons; or
 - holds shares in an investment undertaking on behalf of other persons

FOR PENSION FUND AND TRUST CLIENTS

In completing section 13 of the Application Form the required trustees or where appropriate the authorised signatories of the trustee should sign for and on behalf of the relevant trust. Accordingly, in completing section 13 the full name of the applicant should be given as the name of the trustee or authorised signatory of the trustee acting for and on behalf of the relevant trust. Also, the position of each applicant should be identified as trustee or as the authorised signatory of the trustee. The individuals who are signing in their capacity as trustees or authorised signatories of the trustee will also need to complete section 1 where their personal details are taken and where it is also required that they identify that they are acting in a trustee capacity and not in a personal capacity.

GENERAL

Unless the context otherwise requires all capitalized terms shall have the same meaning as in the most recent Prospectus for Dimensional Funds ICVC , as may be amended from time to time, and the most recent Interim or Annual Report.

The appropriate subscription documentation must have been originally received and the appropriate redemption documentation must be received for a redemption to be effected. Failure to provide such documentation may delay the processing of the redemption and/or delay the payment of redemption proceeds.

The Guidance Notes form part of the Application Form and shall have effect as if set out in the Application Form.

G2. UK FIRMS CONDUCTING INVESTMENT BUSINESS ARE REQUIRED TO COMPLY WITH ANTI-MONEY LAUNDERING REGULATIONS AND LEGISLATION

INDIVIDUALS

If you, as applicant(s) or transferee(s) is/are an INDIVIDUAL(S) please supply the following documents; in the case of joint holders, please supply the relevant documentation in respect of ALL holders.

1. Certified* copy of a photo identification card or passport with signature included AND
2. One form of address verification. This can be supplied as one of the following options:
 - (a.) Original or Certified* copy of a utility bill no greater than 3 months old OR
 - (b.) Original or Certified* copy of a bank statement no greater than 3 months old.

PARTNERSHIPS/TRUSTS

If you are an applicant/transferee that is a PARTNERSHIP or TRUST, please supply the following:

1. List of names, date of birth, occupation and permanent addresses of all partners/trustees/beneficiaries/settlor/protector or equivalent.
2. Certified* copies of the above partners'/trustees'/beneficiaries'/settlor/protector identification and address verification as per that above for an individual and below for a company.
3. Certified* copy of partnership agreement/trust deed.

COMPANIES

If you are an applicant/transferee that is a COMPANY please supply the following:

1. Certified* copy of the Certificate of Incorporation or Certificate to Trade.
2. Certified* copy of Memorandum and Articles of Association or equivalent document.
3. Original or Certified* authorised signatory list.
4. List of all directors' names, occupations, residential and business addresses and dates of birth.
5. Structure Chart

AND

1. Identification and address verification as per individual investors (see Individuals section above) for at least 2 directors and all persons authorised to operate the account.
2. List of names, addresses, dates of birth, occupations and percentage of share capital held of shareholders holding 25% or more of the share capital and Identification and address verification as per individual investors (see Individuals section above) for any shareholders holding 25% or more of the share capital.

INSTITUTIONAL INVESTORS

If you are an applicant/ transferee that is an INSTITUTIONAL Investor e.g. pension fund, local authority, or charity, please supply the following:

1. Certified* authorised signatory list and properly authorised mandate of persons completing the form to act on behalf of the applicant.
2. Certified Constitution of the applicant or other suitable document to establish the legitimate purpose of the organisation applicant. Please contact the Registrar for further details if required.

3. Identification and address verification as per individual investor (see Individuals section above) for all persons authorised to operate the account.
4. A list of all the trustees/governors/directors/board members, their occupation, addresses and dates of birth.
5. If applicable, please provide your proof of charitable status or tax exempt status.

DEPENDING ON THE CIRCUMSTANCES WE MAY ASK FOR FURTHER DOCUMENTATION. IF YOU ARE UNABLE TO COMPLETE ANY PART OF THIS FORM PLEASE CONTACT DIMENSIONAL FUND ADVISORS LTD (SEE FRONT OF FORM FOR CONTACT DETAILS).

NON REGULATED FINANCIAL INSTITUTIONS

Where the Nominee is not regulated but is a wholly owned subsidiary of a regulated parent entity a letter from the parent company confirming the following is required to satisfy AML requirements;

- Confirmation that it is a regulated provider of financial services in its home jurisdiction, details of the name of its regulator and details of the AML legislation it adheres to.
- Confirmation that the Nominee Company is a wholly owned subsidiary of the regulated parent company.
- Confirmation that its subsidiary company applies the AML policy of the regulated parent company.
- Confirmation that the Nominee Company will notify the Fund Management Company and/or SS&C on request of its identification of PEPs or individuals or entities listed on sanction lists.

This letter should be signed by the MLRO, the Head of Compliance, Head of Risk or a Director of the regulated parent company.

REGULATED FINANCIAL INSTITUTIONS

- Evidence of Regulation (Regulator and reference number and that they are authorised or equivalent).
- Structure chart Inc. % (to evidence ultimate beneficial ownership) or declaration form confirming ownership/control structure %.
- Completed Wolfsberg Questionnaire or equivalent (dated within the last 12 months).
- Authorised signatory list.

PLATFORMS

- Evidence of Regulation (Regulator and reference number and that they are authorized or equivalent)
- Proof of company registration/excerpt of the register of the company
- Structure chart Inc. % (to evidence ultimate beneficial ownership) or declaration form confirming ownership/control structure
- Completed Wolfsberg Questionnaire or equivalent (dated within the last 12 months)
- Authorized signatory list
- List of names, addresses, dates of birth, occupations and percentage of share capital held of shareholders holding 25% or more of the share capital and Identification and address verification as per individual investors (see Individuals section above) for any shareholders holding 25% or more of the share capital.

* All of the above copies can be certified by any of the following; a practising solicitor, notary public, certified and public accountant, embassy and consular staff or a designated body in an Approved Country†. Certification requirements may vary. The certifier must clearly state the following information on every document:

1. Full name and signature of the individual certifying the documentation in case we need to contact them; **2.** Name and address of the organisation for which the individual works; **3.** The date the certificate was performed; and **4.** The statement that "I have seen the original document and certify that this is a complete and accurate copy of the original.

† Approved Countries are Member States of the European Union, Argentina, Australia, Brazil, Canada, Channel Islands, Hong Kong, Iceland, Isle of Man, Japan, New Zealand, Mexico, Norway, Principality of Liechtenstein.

FUNDS AND SHARE CLASSES - GBP

DIMENSIONAL FUNDS ICVC

Please note, deals should not be placed on this page, a separate dealing instruction should be used once the account has been opened.

Minimum initial investment £100,000

	ISIN
United Kingdom Core Equity Fund Income (DUKCI)	GB00B15JMG87
United Kingdom Core Equity Fund Accumulation (DUKCA)	GB00B15JMH94
United Kingdom Small Companies Fund Income (DUKSI)	GB0033772061
United Kingdom Small Companies Fund Accumulation (DUKSA)	GB0033771980
United Kingdom Value Fund Income (DUKVI)	GB0033771659
United Kingdom Value Fund Accumulation (DUKVA)	GB0033771766
International Core Equity Fund Income (DICEI)	GB00B23YLF49
International Core Equity Fund Accumulation (DICEA)	GB00B23YLH62
International Value Fund Income (DIVFI)	GB0033772178
International Value Fund Accumulation (DIVFA)	GB0033772285
Emerging Markets Core Equity Fund Income (DEMFI)	GB0033772517
Emerging Markets Core Equity Fund Accumulation (DEMFA)	GB0033772624
Global Short-Dated Bond Fund Income (DGSDI)	GB0033772731
Global Short-Dated Bond Fund Accumulation (DGSDA)	GB0033772848
Global Short-Dated Bond Fund (Gross) Income (DGSGI)	GB00B732BR50
Global Short-Dated Bond Fund (Gross) Accumulation (DGSGA)	GB00B735N017
Sterling Short Duration Real Return Fund Accumulation	GB00BQHNCH49
Sterling Short Duration Real Return Fund Income	GB00BQHNCH62

FUNDS AND SHARE CLASSES - EUR

PLEASE NOTE, DEALS SHOULD NOT BE PLACED ON THIS PAGE, A SEPARATE DEALING INSTRUCTION SHOULD BE USED ONCE THE ACCOUNT HAS BEEN OPENED.

DIMENSIONAL FUNDS ICVC

Minimum initial investment €200,000

	ISIN
Emerging Markets Core Equity Fund Income EUR Class (DEMEI)	GB00BR4R5445
Emerging Markets Core Equity Fund Accumulation EUR Class (DEMEA)	GB00BR4R5551

Entity Self-Certification for FATCA and CRS

Instructions for completion and Data Protection notice.

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 account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this application form you are providing personal information, which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003). Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They in turn may exchange this information, and other financial information with foreign tax authorities, including tax authorities located outside the EU.

If you have any questions about this form or defining the account holder's tax residency status, please speak to a tax adviser or local tax authority.

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or the OECD website at:

<http://www.revenue.ie/en/business/aeoi/index.html>

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

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

Account holders that are Individuals or Controlling Persons should not complete this form and should complete the form entitled "Individual (including Controlling Persons) Self-Certification for FATCA and CRS".

(Mandatory fields are marked with an *)

***Section 1: Account Holder Identification**

*Account holder Name: _____ (the "Entity")

*Country of Incorporation or Organisation: _____

***Current (Resident or 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:**

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

c) The Entity is a **U.S. person but not a Specified U.S. Person** (Please also complete Sections 4 and 5)

Indicate exemption: _____

***Section 3: Entity's FATCA Classification** (the information provided in this section is for FATCA, please note your FATCA 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 or indicate at 3.3 the reason why you are unable to provide a GIIN.

I.	<i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i>	<input type="checkbox"/>
II.	<i>Registered Deemed Compliant Foreign Financial Institution</i>	<input type="checkbox"/>
III.	<i>Participating Foreign Financial Institution</i>	<input type="checkbox"/>

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:

I.	<p>The Entity has not yet obtained a GIIN but is sponsored by another entity which does have a GIIN</p> <p>Please provide the sponsor's name and sponsor's GIIN :</p> <p>Sponsor's Name: _____</p> <p>Sponsor's GIIN: □□□□□□.□□□□□□.□□.□□□□</p> <p>NOTE: this option is only available to Sponsored Investment Entities in Model 1 IGA jurisdictions. Sponsored Investment Entities that do not have U.S. reportable accounts are not required to register and obtain a GIIN with the IRS unless and until U.S. reportable accounts are identified.</p>	
II.	<p>The Entity is an Exempt Beneficial Owner,</p> <p>Please tick and confirm the category of Exempt Beneficial Owner;</p> <p>I. <input type="checkbox"/> Government Entity</p> <p>II. <input type="checkbox"/> International Organisation</p> <p>III. <input type="checkbox"/> Foreign Central Bank</p> <p>IV. <input type="checkbox"/> Exempt Retirement Fund</p> <p>V. <input type="checkbox"/> Collective Investment Vehicle Wholly Owned by Exempt Beneficial Owners.</p>	<input type="checkbox"/>

***Section 4: Common Reporting Standard (“CRS”) Declaration of Tax Residency**

(Note that Entities may have more than one country of Tax Residence)

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”)). Please refer to the OECD CRS Web Portal for AEOI for more information on Tax Residence and TIN’s.

<http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>

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.

NOTE: Under the Irish legislation implementing the CRS, provision of a Tax ID number (TIN) is required to be provided unless:

- a) You are tax resident in a Jurisdiction that does not issue a TIN
- Or
- b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	If TIN unavailable Select (A, B or C) and check box below

If a TIN is unavailable, please tick the appropriate box as follows;

- Reason A** - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents
- Reason B** - The Account Holder is otherwise unable to obtain a TIN (*Please explain why you are unable to obtain a TIN*)
- Reason C** - No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not require the collection of the TIN issued by such country/jurisdiction)

*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 above).

In addition please note that the information that the Entity has to provide may differ depending on whether they are resident in a participating or non-participating CRS Jurisdiction.

For more information please see the OECD CRS Standard and associated commentary.

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/>

5.1 Financial Institutions under CRS:

If the Entity is a *Financial Institution*, **Resident in either a Participating or Non-Participating CRS Jurisdiction** please review and tick one of the below categories that applies **and** specify the type of Financial Institution below.

Note: Please check the Irish Revenue AEOI portal at the time of completion of this form to confirm whether your country of Tax Jurisdiction is considered Participating or Non-Participating for the purposes of CRS Due-Diligence in Ireland.

<https://www.revenue.ie/en/companies-and-charities/documents/aeoi/participating-jurisdictions.pdf>

I.	A Reporting Financial Institution resident in a participating CRS jurisdiction	<input type="checkbox"/>
II.	A Financial Institution Resident in a Non-Participating Jurisdiction (Please also tick the box that applies) <input type="checkbox"/> An Investment Entity resident 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 in section 6 below and complete a separate individual self-certification forms for each of your Controlling Persons) <input type="checkbox"/> An Investment Entity resident in a Non-Participating Jurisdiction that is not managed by another Financial Institution <input type="checkbox"/> Other Financial Institution , including a Depository Financial Institution, Custodial Institution or Specified Insurance Company	<input type="checkbox"/>
III.	Non-Reporting Financial Institution under CRS. Specify the type of Non-Reporting Financial Institution below: <input type="checkbox"/> Governmental Entity <input type="checkbox"/> International Organization <input type="checkbox"/> Central Bank <input type="checkbox"/> Broad Participation Retirement Fund <input type="checkbox"/> Narrow Participation Retirement Fund <input type="checkbox"/> Pension Fund of a Governmental Entity, International Organization, or Central Bank <input type="checkbox"/> Exempt Collective Investment Vehicle <input type="checkbox"/> Trust whose trustee reports all required information with respect to all CRS Reportable Accounts <input type="checkbox"/> Qualified Credit Card Issuer <input type="checkbox"/> Other Entity defined under the domestic law as low risk of being used to evade tax. Specify the type provided in the domestic law: _____	<input type="checkbox"/>

5.2 Non Financial Institution ("NFE") under CRS:

If the Entity is a *not defined as a Financial Institution under CRS* then please tick one of the below categories confirming if you are an Active NFE or Passive NFE.

I.	Active NFE – a corporation the stock of which is regularly traded on an established securities market. Please provide the name of the established securities market on which the corporation is regularly traded: _____	<input type="checkbox"/>
II.	Active NFE – if you are a Related Entity of a regularly traded corporation. Please provide the name of the regularly traded corporation that the Entity is a Related Entity of: _____ Please provide details of the securities market on which the Entity is regularly traded: _____	<input type="checkbox"/>
III.	Active NFE –a Government Entity or Central Bank	<input type="checkbox"/>
IV.	Active NFE –an International Organisation	<input type="checkbox"/>
V.	Active NFE – <i>other</i> than those listed in I, II, III or IV above. (for example a start-up NFE or a non-profit NFE)	<input type="checkbox"/>
VI.	Passive NFE -If this box is ticked please also complete Section 6.1 for each of the Controlling Person(s) of the Entity and a separate " <i>Individual (including Controlling Persons Self-Certification for FATCA and CRS)</i> " form as indicated in section 6.2 for each Controlling Person(s)	<input type="checkbox"/>

Section 6: Controlling Persons

NB: Please note that each Controlling Person must complete a separate “Individual (including Controlling Persons) Self-Certification for FATCA and CRS” 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.

<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/>

6.1 Controlling Person(s) of the Account Holder:

If you have ticked a Passive NFE or Passive NFFE with Controlling Persons in **either the FATCA or CRS Classification sections above**, then please also complete this section for each of the Controlling Person(s) of the account holder and provide a separate “Individual (including Controlling Persons) Self-Certification for FATCA and CRS” form for each Controlling person as per 6.2 below:

Indicate the name of all Controlling Person(s) of the Account Holder:

I.	
II.	
III.	

Note: In case of a trust, Controlling Persons means the settlor(s), the trustee(s), the protector(s) (if any), the beneficiary(ies) or class(es) of beneficiary(ies), **AND** any other natural person(s) exercising ultimate effective control over the trust. With respect to an Entity that is a legal person, if there are no natural person(s) who exercise control over the Entity, then the Controlling Person will be the natural person who holds the position of senior managing official of the Entity.

6.2 Complete a separate “Individual (including Controlling Persons) Self-Certification for FATCA and CRS” form for each Controlling Person listed in Section 6.1.

***Section 7: Declarations and Undertakings**

I/We declare (as an authorised signatory of the Entity) that the information provided in this form is, to the best of my/our knowledge and belief, accurate and complete.

I/We acknowledge and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I/We on behalf of the Entity undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstance (for guidance refer to Irish Revenue or OECD website) occurs which causes any of the information contained in this form to be incorrect.

***Authorised Signature(s):**

***Print Name(s):**

***Capacity in which declaration is made:**

***Date: (dd/mm/yyyy):** _____

Individual (including Controlling Persons) Self-Certification for FATCA and CRS

Instructions for completion and Data Protection Notice

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 account holder's tax arrangements. Please complete the sections below as directed and provide any additional information that is requested. Please note that by completing this form you are providing personal information which may constitute personal data within the meaning of the General Data Protection Regulation (697/2016/EU) (the "GDPR") and applicable Irish data protection legislation (currently the Irish Data Protection Acts 1988 to 2003). Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an account holder's interests in the Fund, with the Irish tax authorities, the Revenue Commissioners. They may in turn exchange this information, and other financial information with foreign tax authorities, including tax authorities outside the EU.

If you have any questions about this form or defining the account holder's tax residency status, please speak to a tax adviser or local tax authority.

For further information and guidance on FATCA or CRS please refer to the Irish Revenue or OECD websites at: <http://www.revenue.ie/en/business/aeoi/index.html>
<http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/> in the case of CRS only.

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

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

Section 1, 2, 3 and 5 must be completed by all Account holders or Controlling Persons.

Section 4 should only be completed by any individual who is a Controlling Person of an entity account holder which is a Passive Non-Financial Entity, or a Controlling Person of an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution.

(Mandatory fields are marked with an *)

***Section 1: Account Holder/Controlling Person Identification**

*Account Holder / Controlling Person 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 and Date 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** a U.S. citizen and/or resident in the U.S. for tax purposes and my U.S. federal taxpayer identifying number (U.S. TIN) is as follows:

OR

- (b) I confirm that **I am not** a U.S. citizen or resident in the U.S. for tax purposes.

***Section 3: Common Reporting Standard (CRS) Declaration of Tax Residency/Residencies (please confirm all Tax Residencies)**

Please indicate your country of tax residence (if resident in more than one country please detail all countries of tax residence and associated tax identification numbers ("TINs")).

For further guidance on Tax Residence and TINs, please refer to the OECD CRS Information Portal <http://www.oecd.org/tax/automatic-exchange/crs-implementation-and-assistance/tax-identification-numbers/#d.en.347759>

NOTE: Under the Irish legislation implementing the CRS, provision of a Tax ID number (TIN) is required to be provided unless:

- a) You are tax resident in a Jurisdiction that does not issue a TIN, **Or,**
- b) You are tax resident only in a non-reportable Jurisdiction (i.e. Ireland or the USA)

Country of Tax Residency	Tax ID Number	If TIN unavailable Select (A, B or C) and check box below

If a TIN is unavailable, please tick the appropriate box as follows;

Reason A - The country/jurisdiction where the Account Holder is resident does not issue TINs or TIN equivalents to its residents

Reason B – The Account Holder is otherwise unable to obtain a TIN (*Please explain why you are unable to obtain a TIN*)

Reason C – No TIN is required. (Note: This should only be selected if the domestic law of the relevant country/jurisdiction does not required the collection of the TIN issued by such country/jurisdiction)

Section 4 – Type of Controlling Person

(**ONLY** to be completed by an individual who is a Controlling Person of an entity which is a Passive NFE 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 *“Individual (Including Controlling Persons) Self-Certification for FATCA and CRS”* form for **each** Controlling Person.

Please Confirm the type of Controlling Person applicable under CRS that applies to you/the Account holder by ticking the appropriate box	Please Tick	Entity Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		
Controlling Person of a trust – settlor		
Controlling Person of a trust – trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non-trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non-trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non-trust) – protector-equivalent		
Controlling Person of a legal arrangement (non-trust) – beneficiary equivalent		
Controlling Person of a legal arrangement (non-trust) – other-equivalent		

***Section 5: Declaration and Undertakings:**

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.

I acknowledge and consent to the fact that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into Agreements to exchange financial account information.

I undertake to advise the recipient promptly and provide an updated Self-Certification form within 30 days where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

Data Protection - Customer Information Notice :

The Common Reporting Standard (CRS), formally referred to as the Standard for Automatic Exchange of Financial Account Information, is an information standard for the automatic exchange of information (AEOI), developed in the context of the Organisation for Economic Co-operation and Development (OECD).

The standard requires that Financial Institutions in participating jurisdictions gather certain information from account holders (and, in particular situations, also collect information in relation to relevant Controlling Persons of such account holders).

Under CRS account holder information (and, in particular situations, information in relation to relevant Controlling Persons of such account holders) is to be reported to the relevant tax authority where the account is held, which, if a different country to that in which the account holder resides, will be shared with the relevant tax authority of the account holder's resident country, if that is a CRS-participating jurisdiction.

Information that may be reported includes name, address, date of birth, place of birth, account balance, any payments including redemption and dividend/interest payments, Tax Residency(ies) and TIN(s).

Further information is available on the OECD website: <http://oecd.org/tax/automatic-exchange/>
And on the Irish Revenue website - <https://www.revenue.ie/en/companies-and-charities/international-tax/aeoi/index.aspx>

*Authorised Signature: _____

*Print Name: _____

*Date: (dd/mm/yyyy): _____

*Capacity (if Controlling Person): _____
