

## INVESTOR PACK

### A) THE SUBSCRIPTION

**You can invest in the Fund in two ways:**

- The simplest method is the subscription via your regular financial intermediary:

**SUBSCRIPTION ORDER FORM** \_\_\_\_\_ **OS**

- The second method is to invest via the Fund or the Registrar and Transfer Agent of the Fund (“the Agent”):

**SUBSCRIPTION FORM** \_\_\_\_\_ **FS**

The documents required for a direct investment with the Fund or the Agent of the Fund are mentioned on page 3.

- FATCA related aspects :

**FOREIGN ACCOUNT TAX COMPLIANT ACT (FATCA)** \_\_\_\_\_ **FF**

### B) OTHER INSTRUCTIONS:

**CONVERSION FORM** \_\_\_\_\_ **FC**

**TRANSFER FORM** \_\_\_\_\_ **FT**

**REDEMPTION FORM** \_\_\_\_\_ **FR**

**IDENTIFICATION DOCUMENT FOR INSTITUTIONAL INVESTORS** \_\_\_\_\_ **II**

**FOREIGN ACCOUNT TAX COMPLIANT ACT (FATCA)** \_\_\_\_\_ **FF**

**WIRING INSTRUCTIONS (Annex)** \_\_\_\_\_ **WI**

*Bankers and financial professionals are invited to use the order forms indicated on page 3. The Agent will recontact them in order to obtain any other document if necessary.*

# VECTOR

Luxembourg open-ended investment company (SICAV)  
"the Fund"

Trade register No.: R.C. Luxembourg 88.004  
Registered office: 20 Boulevard Emmanuel Servais - L-2535 Luxembourg

49450  
Ed: November  
2015

## SUBSCRIPTION ORDER FORM TO BE SENT TO YOUR FINANCIAL INTERMEDIARY

The Fund and its Agent favour subscriptions made via your regular financial intermediary using this OS form. This form must not be used for subscriptions sent directly to the Fund or its Agent.

### 1. My details

Full name or company name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Name of my account with your establishment: \_\_\_\_\_

IBAN account number: \_\_\_\_\_

### 2. My request

I hereby request that you subscribe to the following shares, in your name and for my account, with the Agent of VECTOR:

#### VECTOR

Luxembourg open-ended investment company (SICAV)

Trade register No.: R.C. Luxembourg 88.004

Registered office: 20 Boulevard Emmanuel Servais - L-2535 Luxembourg

Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)

20 Boulevard Emmanuel Servais - L-2535 Luxembourg -

Swift: PRIBLULB – Fax: (352) 24 88 8617

#### Contact details for individual investors:

EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)

#### Otherwise, please contact:

CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

NAMES OF SUB-FUNDS AND CLASSES AVAILABLE FOR SUBSCRIPTION	CURRENCY	NUMBER OF WHOLE SHARES SUBSCRIBED	AMOUNTS SUBSCRIBED (Only registered shares)
			Or

I confirm that I have carefully read the full prospectus of VECTOR and the latest financial reports if any which are available on request.

I also confirm that I have carefully read the key investor information document of the Fund or the relevant Sub-Fund or Sub-Fund's share class and that I received it in good time before my application for shares in the Fund.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Full name (in capital letters) of the Investor or representative of the company and his/her position

## IDENTIFICATION DOCUMENTS

**The Fund and its Agent favour subscriptions made via your regular financial intermediary using the OS-49450 form. If however, the Investor prefers to subscribe directly, the following documents and information must be provided to the Fund and the Agent.**

**First-time application: the following registration documents and order forms are required.**

	Natural Person	Legal Entity
Registration documents	PP Pack	PM Pack
Investor Profile	PP-49450	PM-49450
Certified copy of the Identity card/Passport of the Investor	✓	-
Financial statements	-	✓
Certified copy of the Articles of Association	-	✓
Certified confirmation of registration on Trade and Companies Register	-	✓
List of authorised signatures	-	✓
Certified copy of the Identity card/Passport of representatives of the investor	-	✓
Certified copy of the Identity card/Passport of beneficial owner	Where applicable	Where applicable
And either :		
• Comfort letter from parent company from a FATF country	-	CL-49450
or		
• Declaration completed by each beneficial owner	-	PP-49450 where applicable
Order forms		
Subscription form	FS-49450	FS-49450 (+ II 49450 if institutional sub-fund if applicable)
Transfer form <sup>1</sup>	FT-49450	FT-49450
Redemption form	FR-49450	FR-49450
Conversion form	FC-49450	FC-49450

**For all subsequent operations, only the relevant transaction form is required.**

**The PP or PM identification packs should only be submitted if the information that has been submitted at the time of subscription has been changed.**

In accordance with anti-money laundering legislation, the Fund and/or the Agent acting on behalf of the Fund shall verify the identity of an investor, the origin of sums invested or the beneficiary of redemption proceeds either at the time of subscription, for the entire holding period and at the time of redemption, payment of dividends or transfers. If the investor delays, or fails to produce the aforementioned documents or required information, the subscription/redemption and the payments relative to them as well as the transfer may be refused. The Fund and/or the Agent reserve the right to request all and any additional information. In addition, the Investor undertakes to inform the Fund and the Agent of any changes to his/her personal data.

<sup>1</sup> If the transferee is not an existing shareholder, the registration documents of the transferee must be submitted at the time of transfer.

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## CUSTOMER PROFESSIONAL & FINANCIAL INFORMATION

### IMPORTANT INFORMATION

Dear Investor,

In accordance with the Law of 12 November 2004, as amended from time to time, and with the applicable regulations and CSSF circulars on anti-money laundering and the prevention of terrorist financing we are required (Art.3), to identify our customers. Other than the identification based on certified true copies of identity cards and declarations of beneficial ownership to be provided by each beneficial owner, we are also required to obtain and assess information on the general context of the investment and, more particularly, on the source of the funds and professional activity of the relevant person.

[In addition, information regarding your tax status must be obtained in order to comply with the requirements of the United States of America regulations commonly known as the Foreign Account Tax Compliant \(FATCA\).](#)

We therefore kindly ask you to carefully complete this form so that we can satisfactorily perform our duties.

**Please be advised that:**

- 1. The information below can in principle also be provided by finance professionals who maintain a client relationship with the Investor.**
- 2. We expressly reserve the right to contact you for any further information, in particular for bank or professional references and proof of the source of the funds.**
- 3. All information provided will be dealt with in accordance with the confidentiality standards imposed under Luxembourg banking secrecy laws.**

### A. CUSTOMER IDENTIFICATION

Full name:

Place and date of birth:

Nationality(ies):

Address:

E-mail address:

Telephone:

Fax:

Identity card no.:

Tax residence.:

Contact person in case of death, serious incapacity or lack of contact for more than 2 years  
(names, surnames, address, phone, fax, e-mail)

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**B. PROFESSION (CURRENT AND PREVIOUS IF RELEVANT)**

Name of company + company activity:

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Address:

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Company website or other source of information in public domain:

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Job title/position in said company:

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Ownership interest in the company: • Yes (\_\_\_\_% held) • No

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Company balance sheet total:

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Number of employees:

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Mandate or public office:

If yes: type/place/period

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Additional information:

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**C. REASONS FOR ENTERING INTO A BUSINESS RELATIONSHIP WITH THE BANK**

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**D. TOTAL ANNUAL INCOME**

• < EUR 100,000 • EUR 100,000 – 250,000 • > EUR 250,000

**E. FINANCIAL SITUATION**

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Fixed Assets (in EUR million)

- < 1  
 1 – 5  
 5 – 20  
 20 – 50  
 > 50

Liquid Assets (in EUR million)

- < 1  
 1 – 5  
 5 – 20  
 20 – 50  
 > 50
-

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Additional information:

## F. SOURCE OF WEALTH

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TYPE OF ASSETS	Estimated capital (EUR)	Estimated annual income (EUR)
Professional activity (as described in point B. above)		
Securities		
Real estate		
Insurance policies		
Inheritance		
Sale of business (name/date)		
Artworks		
Other		

Source of wealth: Please describe in detail the economic source of the funds or how you acquired them (enclose copies of any useful supporting documentation)

Additional information:

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## G. IF THE CUSTOMER INFORMATION IS PROVIDED BY A FINANCE PROFESSIONAL

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Name:

Address:

Regulated by:

Type of customer  
relationship:

Client since:

Other information:

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## H. PROTECTION OF PERSONAL DATA

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**The personal data requested above must be transmitted to the Bank in order to proceed with the business relationship. Should the Customer refuse to transmit it, the Bank will reject the business relationship.**

Personal data concerning the Customer (relating mainly to his/her identity, address, personal and marital status), specific information concerning his/her assets and transactions carried out on his/her behalf, may be recorded in one or several databases of the Bank in accordance with applicable legislation. Under this legislation, the Bank may outsource the processing and storage of this data. The Customer expressly authorises the Bank to collect and process personal data relating to him/her as described in the said clause. The Customer may make a written request to consult the data concerning him/her and to rectify any inaccuracies in this data. The Bank may record or process the Customer's personal data for the purpose of managing the investments, carrying out transactions instructed by the Customer, managing contractual relationships, complying with its legal or regulatory obligations, and in general for the purpose of carrying out its obligations and improving the services provided to the Customer.

## I. PLEASE ATTACH ANY OTHER USEFUL INFORMATION AVAILABLE THAT MAY SUPPORT THE REASONS FOR A FUTURE, IF ANY, BUSINESS RELATIONSHIP

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## J. DECLARATIONS AND SIGNATURE

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- 1) The Bank compares the signatures with the specimens held at its offices without having to proceed with a more detailed investigation. With the exception of legally binding regulations, the Bank only declares an obligation of means and is only liable in the case of gross misconduct.
- 2) Once the signature complies at first glance with the specimen held at its offices, the Bank shall not be held responsible for any direct or indirect losses, damages, costs, fees or any other liabilities caused by the fact that the signature on the instructions given to the Bank is fraudulent. The Bank can rely on the signature below without having to proceed with a more detailed investigation and declines all responsibility for any direct or indirect losses, damages, costs, fees or any other liabilities that could result from the absence of any legitimization or any undetected forgery.
- 3) Without prejudice to the above, the Bank is not liable for any losses, damages, costs, fees or any other liabilities which may be directly or indirectly caused by the lack of authenticity or validity of the authorisations which refer to me or third parties with the legal capacity to act on my behalf.
- 4) The Bank reserves the right to refuse to process an instruction from any person whose identity and permissions have not been sufficiently established in the eyes of the Bank.
- 5) The Bank shall not be responsible for any direct or indirect losses, damages, costs, fees or any other liabilities caused in the event of my legal incapacity or third parties authorised to act on my behalf, provided that the Bank has not received prior written notice of the fact.
- 6) I shall compensate and reimburse the Bank for all complaints, claims, legal action, fees, expenses, damages, losses or other sums paid or responsibilities incurred by the Bank resulting from the execution by the Bank of an instruction on my part.
- 7) The Bank is permitted to record telephone conversations with me, which shall serve as evidence in the case of disagreement. The absence of recordings of telephone conversations may not be used against the Bank.

**I hereby declare to be the beneficial owner of the funds/assets.**

**If this should not or no longer be the case, I undertake to inform the Bank immediately and to communicate all relevant information in respect of the identity of the beneficial owner(s).**

**In addition, I expressly declare that the assets/funds considered do not or shall not directly or indirectly come from any unlawful or criminal activity and that the assets/funds considered shall not be used in connection with money-laundering purposes.**

**Finally, I undertake to provide the Agent, upon request, with all documents, forms or information necessary to comply with its legal, contractual or regulatory obligations.**

**Date and signature of the declarant:**

Date:

Signature: \_\_\_\_\_

Name

**Please note that the Fund or the Agent may contact you for additional information if the form is filled out incorrectly or is incomplete.**

### PROFILE FOR A LEGAL ENTITY

- Investor Company  
 Related Company

*(Please tick where applicable)*

#### A. Identification of the Legal Entity

Company name: _____  Registered office: _____  If the Legal Entity is domiciled through a Luxembourg domiciliary agent, please provide the name and address of the domiciliary agent: _____		
The Legal Entity confirms that the aforementioned domiciliary agent has legal capacity as a/an: (please tick where applicable)	<input type="checkbox"/> Credit institution or other finance professional <input type="checkbox"/> Insurance professional <input type="checkbox"/> Lawyer	<input type="checkbox"/> Certified auditor <input type="checkbox"/> Certified accountant <input type="checkbox"/> Approved paying agent
Ownership (please identify the main shareholders of the Company and enclose a copy of the Shareholders' Register):		
Incorporation date:	Place of incorporation:	
Trade Register No.+ VAT No. + Tax ID No.:		
<b>Representatives</b>	<b>A</b>	<b>B</b>
Full name:		
Position:		
Place and date of birth:		
Nationality:		
Address:		
Telephone + Fax:		
Swift address:		
Identity card or passport number:		

Contact person for queries if different to above (names, surnames, address, phone, fax, e-mail):



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## B. Financial situation (to be completed if no annual report is provided)

<b>Activity and scope of business</b>			
Description of current activity:			
Description of previous activity (if relevant):			
Number of staff:			
<b>Financial position (in millions of EUR)</b>			
Capital:		Sales:	
Balance sheet total:		Earnings:	

Please provide copies of any useful supporting documents.

## C. Beneficial ownership

The Legal Entity:

- Declares to be the beneficial owner of the funds and that the funds do not directly or indirectly derive from unlawful or criminal activity.
- Declares that the beneficial owner is/are the person(s) designated below and that the funds do not directly or indirectly derive from unlawful or criminal activity.

<b>Beneficial owner</b>		
Full name:		
Place and date of birth:		
Address:		

The Legal Entity hereby undertakes to immediately inform the Bank if and when the person designated as the beneficial owner changes.

**This document must be accompanied by a PP Form, completed by the beneficial owner.**

## D. Reasons for entering into a business relationship with the Fund

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## E. Protection of personal data

**The personal data requested above must be transmitted to the Bank in order to proceed with the business relationship. Should the Legal Entity refuse to transmit it, the Bank will reject the business relationship.**

Personal data concerning the Legal Entity, specific information concerning its assets and transactions carried out on its behalf, may be recorded in one or several databases of the Bank in accordance with applicable legislation. Under this legislation, the Bank may outsource the processing and storage of this data. The Legal Entity expressly authorises the Bank to collect and process its personal data as described in this clause. The Legal Entity may make a written request to consult the data concerning it and to rectify any inaccuracies in the said data. The Bank may record or process the Legal Entity's personal data for the purpose of managing the registration of investments, carrying out transactions instructed by the Legal Entity managing contractual relationships, complying with its legal or regulatory obligations and in general for the purpose of carrying out its obligations and improving the services provided to the Legal Entity.

## F. Declarations and signature(s)

- 1) The Bank compares the signature(s) with the specimen(s) held at its offices without having to proceed with a more detailed investigation. With the exception of legally binding regulations, the Bank only declares an obligation of means and is only liable in the case of gross misconduct.
- 2) Once the signature(s) complies/comply at first glance with the specimen(s) held at its offices, the Bank shall not be held responsible for any direct or indirect losses, damages, costs, fees or any other liabilities caused by the fact that the signature(s) on the instructions given to the Bank is/are fraudulent. The Bank can rely on the signature(s) below without having to proceed with a more detailed investigation and declines all responsibility for any direct or indirect losses, damages, costs, fees or any other liabilities that could result from the absence of any legitimization or any undetected forgery.
- 3) Without prejudice to the above, the Bank is not liable for any losses, damages, costs, fees or any other liabilities which may be directly or indirectly caused by the lack of authenticity or validity of the authorisations which refer to the Legal Entity or third parties with the legal capacity to act on the Legal Entity's behalf.
- 4) The Bank reserves the right to refuse to process an instruction from any person whose identity and permissions have not been sufficiently established in the eyes of the Bank.
- 5) The Bank shall not be responsible for any direct or indirect losses, damages, costs, fees or any other liabilities caused in the event of the Legal Entity's legal incapacity or third parties authorised to act on the Legal Entity's behalf, provided that the Bank has not received prior written notice of the fact.
- 6) It shall compensate and reimburse the Bank for all complaints, claims, legal action, fees, expenses, damages, losses or other sums paid or responsibilities incurred by the Bank resulting from the execution by the Bank of an instruction on its part.
- 7) The Bank is permitted to record telephone conversations with the Legal Entity, which shall serve as evidence in the case of disagreement. The absence of recordings of telephone conversations may not be used against the Bank.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Name \_\_\_\_\_

By signing this document, the Legal Entity expressly and specifically accepts the limits of responsibility in favour of the Bank stipulated in the section "Declarations and signature(s)".

Please note that the Fund or the Agent may contact you for additional information if the form is filled out incorrectly or is incomplete.

**SUBSCRIPTION FORM**

To be sent to the Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
 20 Boulevard Emmanuel Servais - L-2535 Luxembourg -  
 Swift : PRIBLULB – Fax: (352) 24 88 8617  
**Contact details for individual investors:**  
 EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)  
**Otherwise, please contact:**  
 CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

**1. Details of the Investor(s) (to be used for all communication)**

1. Full name or company name: \_\_\_\_\_  
 2. Full name or company name (\*): \_\_\_\_\_

(\* In the case of joint Investors, all Investors must sign the present subscription form. However, the Fund shall only recognise the person appointed to exercise the rights relative to each of the shares of the Fund. With the exception of an objection by the Board of Directors, the person appointed to exercise these rights shall be the person whose name appears first on the present subscription form.

Agent client reference number (appearing on the confirmation of subscription for existing Investors who have already subscribed via the Agent): \_\_\_\_\_

**2. Official address**

Address: \_\_\_\_\_  
 Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_  
 Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Sub-fund selection**

**3.1. Selection**

NAMES OF SUB-FUNDS AND CLASSES AVAILABLE FOR SUBSCRIPTION	CURRENCY	NUMBER OF WHOLE SHARES SUBSCRIBED or AMOUNTS SUBSCRIBED	DELIVERY (see point 3.2 below)	
			R.	C.
		or		

**3.2. Delivery**

**Delivery of registered shares**

By selecting R from the table above, I understand that physical certificates shall not be issued for registered shares. Instead, the Agent shall enter an order confirmation in the shareholders' register, which is held at the registered office of the Agent. Confirmation of shares recorded in the shareholders register shall be sent to the shareholder within the time limit specified in the prospectus.

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## **Delivery via a clearing system**

By selecting C from the table above, I request the delivery of my shares via a clearing system and the registration of the subscription in the name of the clearing system or its custodian according to the details below:

Name of clearing establishment: \_\_\_\_\_

Country: \_\_\_\_\_ Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

## 4. Bank details of Investor

Details of the bank through which subscription payments shall be made. The proceeds of redemptions, and where applicable, dividends, shall be transferred to the same account.

Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

Name of bank: \_\_\_\_\_ Swift code: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Intermediary bank involved in the payment: \_\_\_\_\_

Swift code: \_\_\_\_\_ Country: \_\_\_\_\_

## 5. Bank details of the fund custodian

The total amount payable for subscriptions shall be transferred in favour of Banque Privée Edmond de Rothschild Europe via its correspondent bank in the currencies given below. The Investor's remitting bank must indicate the Investor's name and the name of the fund concerned when making a payment to the correspondent bank of Banque Privée Edmond de Rothschild Europe. Payments by cheque are not accepted.

Please find attached our Cash Correspondent Banks (Wiring Instructions) in an annex

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## Declarations and Signature

As Investor, I hereby expressly declare and approve the following:

- 1) I have carefully read a copy of the latest Prospectus of the Fund and have received a copy of the latest available financial reports. I am fully aware of and understand the financial risks associated with a subscription to the Fund and I accept that market fluctuations may lead to a loss of all or part of my capital. However, I confirm that this investment is appropriate for my needs.
- 2) **I confirm that I have received and carefully read the relevant Fund’s key investor information document (KIID) and that I received it in good time before my application for shares in the Fund and accordingly, by ticking the box hereinafter, I expressly agreed to only receive the Fund’s KIID by means of a consultation of the website [.....]. By ticking this box I also confirm that I have been given the choice to receive the Fund’s relevant KIID on paper and accept to access it only through the aforementioned website :**   
**(To the extent, you ticked the box, please do not forget to indicate your email address under section 2 of this subscription form.)**
- 3) The present subscription order is binding on me. However, I understand that the Fund or its Transfer Agent may reject this subscription order in full or in part without having to justify its decision and that the Fund or its Transfer Agent has the right to request and obtain information, documents or other items for the purpose of identifying the beneficiary of this subscription as well as any document that the Fund may consider necessary to enable it to meet its legal and regulatory obligations and to maintain its relationship with me. In particular, I confirm that I meet all the conditions of eligibility. The Fund is authorised to request a compulsory redemption at the redemption price of the valuation date applicable. I shall be obliged to compensate the Fund for any possible losses incurred. The subscription order may be deferred until the next valuation date following the date on which the Fund or its Agent has received all the information concerning myself in a form satisfactory to the Fund or its Agent. Where necessary, any payment made before the formal acceptance of the subscription shall be deposited in a non interest-bearing account.
- 4) I agree to transfer under good value date the correct subscription amount in the correct currency. I understand that in the case of non-payment of the correct subscription amount under good value date, the subscription may be cancelled and you shall bear the costs of such a cancellation. The Fund may therefore take repeated judicial or non-judicial action against me or any representative as a result of non-payment.
- 5) The present subscription form may be sent by post or fax and the subscription orders may be sent by Swift. The Fund or its Agent shall not be held responsible for the acceptance of a subscription order sent by fax. I undertake to forward immediately the original subscription form to the Fund or its Agent by express or priority mail at my own expense. The Fund or its Agent may refuse any subscription order received or cancel any subscription orders accepted by fax, if the original subscription form does not reach them within five Luxembourg bank business days following the appropriate valuation date. The absence of the original may not be used against the Fund or its Agent. The Investor agrees to compensate the Fund for any losses resulting from the cancellation of a subscription.
- 6) The Fund or its Agent shall communicate all correspondence to me at my own risk by ordinary post or by registered post if the laws and regulations of Luxembourg deem it necessary, to the address indicated on the present subscription form (or to any other address which I may notify the Fund or its Agent in the future). I accept that all correspondence sent by the Fund or its Agent is considered as being valid from the time it has been sent to the aforementioned address, the presumed date of dispatch being the date appearing on the copy (or the dispatch list) kept by the Fund or its Agent.
- 7) Any requests or complaints that I may have relative to any transaction of the Fund shall be sent in writing to the Fund or its Agent.
- 8) The Fund and its Agent compare the signatures sent to them with the specimens held at their offices without having to proceed with a more detailed investigation. To the extent permitted by Luxembourg laws, the Fund and its Agent are only bound by a best-effort obligation (“*obligations de moyens*”) and are only liable in the case of gross or wilful misconduct.
- 9) Once the signature complies at first glance with the specimens held at their offices, the Fund or its Agent shall not be held responsible for any damages caused by the fact that the signatures on the instructions given to the Fund or its Agent are fraudulent. The Fund or its Agent may trust the signature below without having to proceed with a more detailed investigation and decline all responsibility for damages that could result from the absence of any legitimization or any undetected forgery.
- 10) Without prejudice to the above, the Fund and its Agent are not liable for damages which may be directly or indirectly caused by the lack of authenticity or validity of the authorisations which refer to me or third parties with the legal capacity to act on my behalf.

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- 11) The Fund or its Agent reserves the right to refuse to process an instruction from any person whose identity and permissions have not been sufficiently established in the eyes of the Fund or its Agent.
- 12) The Fund or its Agent shall not be responsible for damages caused in the event of my legal incapacity or third party authorised to act on my behalf, provided the Fund or its Agent has not received prior written notice of the fact.
- 13) I shall compensate and reimburse the Fund or its Agent for all complaints, claims, legal action, fees, expenses, damages, losses or other sums paid or responsibilities incurred by the Fund or its Agent resulting from the execution by the Fund or its Agent of an instruction on my part.
- 14) The Fund or its Agent are permitted to record telephone conversations with the Fund or its Agent, which shall serve as evidence in the case of disagreement. The absence of recordings of telephone conversations may not be used against the Fund or its Agent.
- 15) The present subscription form as well as all orders resulting from it are exclusively governed by Luxembourg law and all disputes shall be referred to the courts of the District of Luxembourg City. However, I acknowledge that the Fund or its Agent may take legal action before another court which would have been qualified if the aforementioned jurisdiction had not been chosen, in particular within the jurisdiction of my area of residence or of that of the Agent or approved intermediary.
- 16) I understand that the personal data requested above must be transmitted in order to proceed with the subscription. Should I refuse to communicate it, the Fund or its Agent will refuse the subscription. I understand that my personal data (relating mainly to my identity, address, personal and marital status), specific information concerning my assets and transactions carried out on my behalf, may be recorded in one or several databases of the Fund or the Agent in accordance with applicable legislation. Under this legislation, the Fund or the Agent may outsource the processing and storage of this data. I expressly authorise the Fund or its Agent to collect and process personal data relating to me as described in this clause. I understand that I can consult the data concerning me and rectify any inaccuracies in this data. The Fund or its Agent may record or process my personal data for the purpose of managing the registration of the investment funds, carrying out my transactions, managing contractual relations and in general for the purpose of carrying out their obligations, in particular regarding the identification of the investors as provided for under FATCA regulation, and improving the services provided to me.
- 17) I undertake to provide the Fund and/or its Agent, upon request, with all documents, forms and information in order for them to comply with their respective legal or regulatory obligations.
- 18) With regard to the tax, legal, currency and other economic considerations related to this investment, I have only relied on the advice of, or have only consulted with, my own professional advisers.
- 19) I have such knowledge and experience in financial and business matters as to be capable of evaluating the merits of, and I am able to bear the economic risk of an investment in the Fund.

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Full name (in capital letters) of the Investor or representative of the company and his/her position

With his/her signature, the Investor expressly and specifically accepts the limits of responsibility in favour of the Fund stipulated in the paragraph Declarations and Signature.

Signature: \_\_\_\_\_

Full name (in capital letters) of the Investor or representative of the company and his/her position

**TRANSFER FORM**

**This form can be used in the case of a transfer between two investors (Part A) (hereinafter defined as “Transferor” and “Transferee”) or in the case of an exchange from a type of shares to another (Part B) (registered shares to delivery in a clearing system or vice-versa) held by a same investor.**

To be sent to the Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
20 Boulevard Emmanuel Servais - L-2535 Luxembourg -

Swift: PRIBLULB – Fax: (352) 24 88 8617

**Contact details for individual investors:**

EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)

**Otherwise, please contact:**

CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

**A) Transfer to another investor (According to the prospectus conditions)**

1. Transferor's details

Full name or company name: \_\_\_\_\_

Address: \_\_\_\_\_

Agent client reference number (appearing on the confirmation of subscription for Investors who have already subscribed via the Agent): \_\_\_\_\_

2. Transferee's Details

Full name or company name: \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Agent client reference number (appearing on the confirmation of subscription for Investors who have already subscribed via the Agent): \_\_\_\_\_

**The transferee must provide the identification documents prior to consideration of this transfer order.**

3. Transfer details for registered shares

It is hereby certified that the Transferor transfers to the Transferee

\_\_\_\_\_ Share(s) of \_\_\_\_\_

Subject to the clauses and conditions of the Articles of Incorporation of the Fund and any modifications thereof, the Transferee hereby accepts the present transfer under the same clauses and conditions.

The Transferor and the Transferee hereby confirm having separately stated the financial conditions of the transfer and request irrevocably the Fund to recognise and register the transfer by appropriate reference to this transfer declaration in the shareholders' register of the Fund.

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## 4. Bank details of the Transferee

Payment instructions for the proceeds of redemptions and dividends if any

Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

Name of bank: \_\_\_\_\_ Swift code: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Intermediary bank involved in the payment: \_\_\_\_\_

Swift code: \_\_\_\_\_ Country: \_\_\_\_\_

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Transferor

\_\_\_\_\_  
Signature of the Transferee

\_\_\_\_\_  
Full name (in capital letters) of the  
Transferor or representative of the  
company and his/her position

\_\_\_\_\_  
Full name (in capital letters) of the  
Transferee or representative of the  
company and his/her position

## B) Exchange to another type of share (According to the prospectus conditions)

### 1. Details of the Applicant for the exchange

Shareholder name: \_\_\_\_\_

Address: \_\_\_\_\_

Agent client reference number (appearing on the confirmation of subscription for Investors who have already subscribed via the Agent): \_\_\_\_\_

The shares concerned by the transfer are:

\_\_\_\_\_ Share(s) of \_\_\_\_\_

- Registered in the shareholder's register
- Delivered via a clearing system according to the details below:

Name of clearing establishment: \_\_\_\_\_

Country: \_\_\_\_\_ Account name: \_\_\_\_\_ Account number: \_\_\_\_\_



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The Applicant requests :

\_\_\_\_\_ Share(s) of \_\_\_\_\_

The Registration in the shareholder's register

A delivery via a clearing system

the delivery of the shares via a clearing system and the registration of the subscription in the name of the clearing system or its custodian according to the details below:

Name of clearing establishment: \_\_\_\_\_

Country: \_\_\_\_\_ Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

In this case the name of the shareholder shall not appear on the register.

Date: \_\_\_\_\_

\_\_\_\_\_  
Signature of the Applicant for the exchange

\_\_\_\_\_  
Full name (in capital letters) of the applicant for the exchange or representative of the company and his/her position

## Declarations and signature related to the transfer

As transferee, I hereby expressly declare and approve the following:

- 1) I have carefully read a copy of the latest Prospectus of the Fund and have received a copy of the latest available financial reports. I am fully aware of and understand the financial risks associated with a subscription to the Fund and I accept that market fluctuations may lead to a loss of all or part of my capital. I confirm that this investment is appropriate for my needs.
- 2) **I confirm that I have received and carefully read the relevant Fund's key investor information document (KIID) and that I received it in good time before my application for shares in the Fund and accordingly, by ticking the box hereinafter, I expressly agreed to only receive the Fund's KIID by means of a consultation of the website [.....] By ticking this box I also confirm that I have been given the choice to receive the Fund's relevant KIID on paper and accept to access it only through the aforementioned website:**   
**(To the extent, you ticked the box, please do not forget to indicate your email address under section 2 of this transfer form.)**
- 3) The present transfer order is binding on the part of the transferor and transferee; However, the Fund or its Transfer Agent may reject this transfer order in full or in part without having to justify its decision. Moreover, the Fund or its Transfer Agent have the right to request information, documents or other items for the purpose of identifying me and beneficiary as well as any document that the Fund may consider necessary to enable it to meet its legal and regulatory obligations and to maintain its relationship with me. In particular, I confirm that I meet all the conditions of eligibility. The Fund is authorised to request a compulsory redemption at the redemption price of the valuation date applicable. I shall be obliged to compensate the Fund for any possible losses incurred. The transfer order may be deferred until next evaluation date following the date on which the Fund or its Agent shall have received all the information concerning myself in a form approved by the Fund or its Agent.
- 4) The present transfer form may be sent by post or fax. The Fund or its Agent shall not be held responsible for the acceptance of a transfer order sent by fax. I undertake to immediately forward the original transfer form to the Fund or its Agent by express or priority mail at my own expense. The Fund or its Agent may refuse any transfer order received or cancel any transfer order accepted by fax, if the original transfer form does not reach them within five Luxembourg bank business days following the appropriate valuation date. The absence of the original may not be used against the Fund or its Agent.
- 5) The Fund or its Agent shall communicate to me at my own risk by ordinary post or by registered post if the laws and regulations of Luxembourg deem it necessary, at the address indicated on the present transfer form (or to any other

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address of which I could notify the Fund or its Agent at a later date). I accept that all correspondence sent by the Fund or its Agent is considered as being valid from the time it has been sent to the aforementioned address, the presumed date of dispatch being the date appearing on the copy (or the dispatch list) kept by the Fund or its Agent.

- 6) Any requests or complaints that I may have relative to any transaction of the Fund shall be sent in writing to the Fund or its Agent.
- 7) The Fund and its Agent compare the signatures sent to them with the specimens held at their offices without having to proceed with a more detailed investigation. To the extent permitted by Luxembourg laws, the Fund and its Agent are only bound by a best-effort obligations ("*obligations de moyens*") and are only liable in the case of gross or wilful misconduct.
- 8) Once the signature complies at first glance with the specimens held at their offices, the Fund or its Agent shall not be held responsible for any damages caused by the fact that the signatures on the instructions given to the Fund or its Agent are fraudulent. The Fund or its Agent may trust the signature below without having to proceed with a more detailed investigation and decline all responsibility for damages that could result from the absence of any legitimization or any undetected forgery.
- 9) Without prejudice to the above, the Fund and its Agent are not liable for damages which may be directly or indirectly caused by the lack of authenticity or validity of the authorisations which refer to the transferor, transferee or third parties with the legal capacity to act on their behalf.
- 10) The Fund or its Agent reserves the right to refuse to process an instruction from any person whose identity and permissions have not been sufficiently established in the eyes of the Fund or its Agent.
- 11) The Fund or its Agent shall not be responsible for damages caused in the event of the legal incapacity of the transferor, transferee or third party authorised to act on his/her behalf, provided the Fund or its Agent has not received prior written notice of the fact.
- 12) I shall compensate and reimburse the Fund or its Agent for all complaints, claims, legal action, fees, expenses, damages, losses or other sums paid or responsibilities incurred by the Fund or its Agent resulting from the execution in good faith by the Fund or its Agent of an instruction on my part.
- 13) The Fund or its Agent are permitted to record telephone conversations with the Fund or its Agent, which shall serve as evidence in the case of disagreement. The absence of recordings of telephone conversations may not be used against the Fund or its Agent.
- 14) The present transfer form as well as all orders resulting from it are exclusively governed by Luxembourg law and all disputes shall be referred to the courts of the District of Luxembourg City. However, I acknowledge that the Fund or its Agent may take legal action before another court which would have been qualified if the aforementioned jurisdiction had not been chosen, in particular within the jurisdiction of my area of residence or of that of the Agent or approved intermediary.
- 15) I understand that the personal data requested above must be transmitted in order to proceed with the transfer. Should I refuse to communicate it, the Fund or its Agent will refuse the transfer. I understand that my personal data (relating mainly to my identity, address, personal and marital status), specific information concerning my assets and transactions carried out on my behalf, may be recorded in one or several databases of the Fund or the Agent in accordance with applicable legislation. Under this legislation, the Fund or the Agent may outsource the processing and storage of this data. I expressly authorise the Fund or its Agent to collect and process personal data relating to me as described in this clause. I understand that I can consult the data concerning me and rectify any inaccuracies in this data. The Fund or its Agent may record or process my personal data for the purpose of managing the registration of the investment funds, carrying out my transactions, managing contractual relations, complying with their respective legal or regulatory obligations, and in general for the purpose of carrying out their obligations and improving the services provided to me.
- 16) I undertake to provide the Fund and/or its Agent, upon request, with all documents, forms and information in order for them to comply with their respective legal or regulatory obligations.
- 17) With regard to the tax, legal, currency and other economic considerations related to this investment, I have only relied on the advice of, or have only consulted with, my own professional advisers.
- 18) I have such knowledge and experience in financial and business matters as to be capable of evaluating the merits of, and I am able to bear the economic risk of an investment in the Fund.
- 19) To the extent I am subscribing as intermediary or nominee of behalf of underlying investors, and in case of indemnification of investors due to net asset value calculation error or correction of the consequences resulting from non-compliance with the investment rules of the Fund (as specified in the CSSF circular 2002/77), I hereby commit to forward the amounts received from the Fund to the underlying investors effectively entitled thereto.

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Date: \_\_\_\_\_

Signature of Transferee: \_\_\_\_\_

Full name (in capital letters) of the Transferee or representative of the company and his/her position

With his/her signature, the transferee expressly and specifically accepts the limits of responsibility in favour of the Fund stipulated in the paragraph Declarations and Signature.

Signature of Transferee: \_\_\_\_\_

Full name (in capital letters) of the Transferee or representative of the company and his/her position

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## REDEMPTION FORM

To be sent to the Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
20 Boulevard Emmanuel Servais - L-2535 Luxembourg -  
Swift: PRIBLULB – Fax: (352) 24 88 8617

**Contact details for individual investors:**

EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)

**Otherwise, please contact:**

CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

### 1. Shareholder(s) details

Full name or company name: \_\_\_\_\_

Agent client reference number (appearing on the confirmation of subscription for Investors who have already subscribed via the Agent): \_\_\_\_\_

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

### 2. Sub-fund selection

NAMES OF SUB-FUNDS AND CLASSES AVAILABLE FOR REDEMPTION	CURRENCY	NUMBER OF WHOLE SHARES REDEEMED	Or	AMOUNTS REDEEMED	DELIVERY (see point 3.2 below)	
					R.	C.
			or			

**This redemption request is irrevocable.**

**The proceeds of the redemption shall be paid into the bank account from which the subscription was paid. However, if this has changed, please indicate the new details below. This payment may only be executed if the identification documents required for anti-money laundering purposes has been provided in advance.**

### 3. New bank details of shareholder

Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

Name of bank: \_\_\_\_\_ Swift code: \_\_\_\_\_

Address: \_\_\_\_\_ Postal code: \_\_\_\_\_

City: \_\_\_\_\_ Country: \_\_\_\_\_

Intermediary bank involved in the payment: \_\_\_\_\_

Swift code: \_\_\_\_\_ Country: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Full name (in capital letters) of the Shareholder or representative of the company and his/her position

**CONVERSION FORM**

To be sent to the Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
 20 Boulevard Emmanuel Servais - L-2535 Luxembourg -  
 Swift: PRIBLULB – Fax: (352) 24 88 8617  
**Contact details for individual investors:**  
 EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)  
**Otherwise, please contact:**  
 CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

**1. Shareholder(s) details**

Full name or company name: \_\_\_\_\_

Agent client reference number (appearing on the confirmation of subscription for Investors who have already subscribed via the Agent): \_\_\_\_\_

**2. Official address**

Address: \_\_\_\_\_

Postal code: \_\_\_\_\_ City: \_\_\_\_\_ Country: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**3. Selection of sub-funds redeemed**

NAMES OF SUB-FUNDS REDEEMED	CURRENCY	NUMBER OF SHARES TO BE CONVERTED	AMOUNTS TO BE CONVERTED
		or	

**4. Selection of sub-funds subscribed**

NAMES OF SUB-FUNDS SUBSCRIBED	CURRENCY	PERCENTAGE	AMOUNTS SUBSCRIBED	DELIVERY	
				R.	C.
		or			

Delivery of registered shares

Converted shares shall be recorded in the shareholders' register of the Fund, except where otherwise stated.

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## Delivery via a clearing system

By selecting C from the table above, I request the delivery of my shares via a clearing system and the registration of the conversion in the name of the clearing system or its custodian according to the details below:

## KIID Receipt

I confirm that I have received and carefully read the key investor information document (KIID) corresponding to the Fund's class I wish to invest in and that I received it in good time before my application for shares in the Fund.

Name of clearing establishment: \_\_\_\_\_

Country: \_\_\_\_\_ Account name: \_\_\_\_\_ Account number: \_\_\_\_\_

## **THIS CONVERSION ORDER IS IRREVOCABLE.**

Date: \_\_\_\_\_

Signature: \_\_\_\_\_

Full name (in capital letters) of the Investor or representative of the company and his/her position

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## IDENTIFICATION DOCUMENT FOR INSTITUTIONAL INVESTORS

(FUNDS, SUB-FUNDS OR CLASSES DEDICATED TO INSTITUTIONAL INVESTORS  
IN THE MEANING OF THE LAW OF ART. 174 (2) OF THE LAW OF 17/12/2010)

C/o Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
20 Boulevard Emmanuel Servais - L-2535 Luxembourg –  
Swift: PRIBLULB – Fax: (352) 24 88 8617

### Contact details for individual investors:

EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)

### Otherwise, please contact:

CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

The undersigned certify the accuracy of the following information:

### 1. Name and address of the institutional investor

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### 2. Activity

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### 3. Local supervisory authority

Please specify the name and website of your supervisory authority:

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### 4. Subscription

Please confirm whether the subscription is made on your own behalf, or in your name but on behalf of a third party entity:

- Yes, on our own behalf.
- No, in our own name but on behalf of a third party:
- which is an institutional investor. \*
  - which is a non-institutional client managed on the basis of a discretionary management mandate. The name of such non-institutional client(s) will not appear in the Shareholder' Register of the Fund and accordingly will not have recourse to the shares of the sub-fund concerned. \*\*

*\* The investor expressly confirms by the signature of this document that the client on whose behalf it is acting is an institutional investor. Should the investor's client lose its institutional quality, the undersigned hereby undertakes to inform the Fund / Agent of such change immediately and to redeem or convert its shares as the case may be.*

*\*\* In case of a Credit Institution or other Professional of the Financial Sector subscribing to shares on behalf of clients which do not qualify themselves as institutional investors, the Fund will only issue shares to such credit institutions or other professionals of the financial sector expressly confirming by the signature of this document they have entered into a discretionary portfolio management agreement with the clients on whose behalf they are acting. In the case the discretionary management mandate is cancelled, the undersigned hereby undertakes to inform the Fund / Agent of such cancellation and to redeem or convert its shares as applicable.*

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## General Provisions

### I) Subscription conditions

*Subscriptions will only be accepted if accompanied by the Identification Documents (see page 1). The Fund / Agent may request any additional information (including, but not limited to, a copy of the discretionary management mandate) in order to assess the qualification of the Investor as an institutional investor.*

*If the Fund / Agent consider that the Investor does not qualify as an institutional investor (see definition below) or if the Fund / Agent is unable on the basis of the documents provided by the Investor to ascertain that the Investor qualifies as an institutional investor, the Fund / Agent may at its full discretion, refuse the subscription request.*

*Moreover, the Commission de Surveillance du Secteur Financier (“CSSF”) may require the Fund / Agent to reveal the identity of the shareholders which hold shares in the Fund, Sub-Funds or Classes reserved to institutional investors. In such case, the Fund / Agent is entitled to forward all information and documents received in relation to the relevant shareholders to the CSSF.*

### II) Compulsory redemption

*If it appears to the Fund that any shareholder, acting either alone or in conjunction with any other person, does not qualify as an institutional investor or if a subscription has been made on behalf of non-institutional clients on the basis of a discretionary management mandate and such mandate has been cancelled, the Fund may instruct such shareholder to sell his shares. If such shareholder fails to comply with such instruction within 30 days, the Fund may compulsorily redeem or cause to be redeemed all shares held by such shareholder at the then prevailing net asset value less redemption charges, if any.*

*The shareholder undertakes to indemnify the Fund or its Agent and hold the Fund or its Agent harmless against all demands, claims, actions, costs, expenses, damages, losses or other monies paid or liability incurred by the Fund or its Agent as a result of the fact that it appears that the concerned shareholder does not qualify, at any date after the subscription, as an institutional investor within the meaning of the 2010 Law.*

Institutional Investor represented by:

Date: \_\_\_\_\_

Signature \_\_\_\_\_

Name \_\_\_\_\_



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## **INSTITUTIONAL INVESTORS**

IN THE MEANING OF THE LAW OF ART. 174 (2) OF THE LAW OF 17/12/2010

In order to ensure that the investor is an institutional investor, the Fund / Agent will examine the information as provided by the investor in order to ascertain whether the investor falls within one of the following categories:

### **Financial professionals**

This category concerns credit institutions or other professionals of the financial sector (ie supervised entity equivalent as those defined in the meaning of the Luxembourg law dated 5 April 1993 as amended), insurance companies or re-insurance companies and social security institutions.

Insurance companies may be considered as institutional investors, even if the beneficiaries of the insurance policies are private investors, provided the insurance companies remain the sole Investors of shares.

Credit institutions or other professionals of the financial sector subscribing to shares in their own name may be considered as institutional investors, even if the investment in the Fund is made on behalf of a person not qualifying as an institutional investor, provided that such person has entered into a discretionary management relationship with the relevant credit institution or other professional of the financial sector.

### **Companies having substantial assets under management**

Industrial or commercial companies having substantial assets under management and regularly acting on the financial markets may also be considered as institutional investors.

### **Holding companies**

Holding companies or similar vehicles, whether established in Luxembourg or abroad may be regarded as institutional investors, even if their own shareholders may not be regarded as being institutional investors, provided that the relevant holding companies or similar vehicles prove to have substance, in the sense that they must have their own structure and activities and hold significant financial interests.

### **Other categories of institutional investors**

Undertakings for collective investment, including pension funds organised by a company for its employees, may be considered as institutional investors, even if their own investors may not be regarded as being institutional investors. Local authorities, such as regions, provinces, cantons, municipalities, may also be considered as institutional investors.

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## FOREIGN ACCOUNT TAX COMPLIANT ACT ("FATCA")<sup>2</sup>

C/o Agent: EDMOND DE ROTHSCHILD ASSET MANAGEMENT (Luxembourg)  
20 Boulevard Emmanuel Servais - L-2535 Luxembourg -  
Swift: PRIBLULB – Fax: (352) 24 88 8617  
**Contact details for individual investors:**  
EDRAM: Tel (352) 2488 2250 / [CSM-TA@bpere.eu](mailto:CSM-TA@bpere.eu)  
**Otherwise, please contact:**  
CACEIS: Tel (352) 4767 6299 / [EDRAM-TA@caceis.com](mailto:EDRAM-TA@caceis.com)

On March 18, 2010, the United States of America enacted provisions commonly known as the Foreign Account Tax Compliant (FATCA).

According to the FATCA Rules, FFIs, unless they can rely under ad-hoc lighter or exempted regimes, need to report to the IRS certain holdings by / and payments made to a/ certain U.S. investors b/ certain U.S. controlled foreign entity investors, c/ non U.S. financial institution investors that do not comply with their obligations under FATCA and d/ investors that are not able to document clearly their FATCA status. Moreover, any account that is not properly documented may have to suffer a 30% WHT.

On March 24<sup>th</sup>, 2014, Luxembourg and U.S. governments entered into a Model I IGA which aims to coordinate and facilitate the reporting obligations under FATCA with other U.S. reporting obligations of Luxembourg financial institutions. According to the IGA, Luxembourg FFIs will generally have to report to the Luxembourg tax authorities instead of directly to the IRS. Information will be communicated onward by the Luxembourg authorities to the IRS under the general information exchange provisions of the U.S. Luxembourg income tax treaty.

In order to comply with its obligations, the Fund needs to gather from subscriber(s) a series of additional information and documents relating to subscriber(s) and potential beneficial owners.

The Fund, subject to the Fund's constitutive documents and prospectus / offering memorandum and any applicable laws may:

- (i) Withhold the payment of any dividend or redemption proceeds to a Unitholder / Shareholder of the Fund until the Fund holds sufficient information;
- (ii) Reject at its discretion any subscription for Units / Shares;
- (iii) Compulsorily redeem at any time the Units held by Unitholder / Shareholders who are excluded from purchasing or holding Units / Shares; and
- (iv) decline to register the transfer of Units to any person who is excluded from purchasing or holding Units.
- (v) take any additional measures authorized by the Fund's constitutive documents and prospectus / offering memorandum.

**A. In this connection, the undersigned subscriber hereby declares and certifies, by ticking the correspondent box that,** in accordance with the principles of FATCA, the regulations relating to Information Reporting by Foreign Financial Institutions and Other Foreign Entities released by the IRS on 28<sup>th</sup> January 2013 (the "FATCA Regulations"), all subsequently published FATCA announcements and as the case may be, the provisions of the intergovernmental agreement (IGA) entered between the country of residence of the subscriber and the United States of America to improve International Tax Compliance and with respect to FATCA, as well as relevant national Laws:

<sup>2</sup> "FATCA" means the Foreign Account Tax Compliance Act such as enacted and adopted by the United States of America on March 18, 2010, requiring US individuals to report their financial accounts held outside of the United States and foreign financial institutions to report to the Internal Revenue Service about their US clients

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2015

Name and address or registered office of the investor

**1.  I AM / WE ARE US RESIDENT** (For further details please refer to definition below<sup>3</sup>. For joint accounts, each subscriber shall provide the relevant confirmation).

**a) If I am / we are individual(s):**

We undertake to provide the Fund and/or its Agent a W9 Form duly filled and electronically signed in accordance with the principles of the US Tax laws.

**b) If I am / we are Corporate entities:**

The Corporate entity is a company having its headquarter registered office in the U.S.;

OR

The Corporate entity is a company incorporated in the U.S. (U.S. corporation)

We undertake to provide the Fund and/or its Agent a W9 Form duly filed and electronically signed in accordance with the principles of the US Tax laws.

**2.  I AM / WE ARE NOT US RESIDENT** (For joint accounts, each subscriber shall provide the relevant confirmation)

**a) If I am / We are individuals: (Please tick as much cases as relevant to your own situation)**

**(aa)**

I / We have no US Bank account(s);

<sup>3</sup> Within the meaning of the U.S. Internal Revenue Code and subject to any amendments to the legal definition which may be from time to time adopted, shall qualify as "US Person" the following:

**"US Person (Corporate entity):** (i) any company incorporated in the US (US corporation); (ii) any US partnership (domestic partnership); (iii) any trust if a US court is able to control the trust administration and one or several US persons are entitled to control any substantial decisions of the trust; (iv) any states of the United States; (v) any company that has a bank account located in the US; (vi) any company having its headquarter registered office in the US; (vii) any company having its headquarter registered office located outside the US but having one or more US beneficial owner(s).

**"US Person (Individual):**

(i) US citizen (including double or multiple nationality and US place of birth);

(ii) US residents or owner of a permanent residence title ("Green Card");

(iii) Individual having resided in the USA for a "substantial period of time in the course of the year "N" and / or the two years before. Example of "substantial" period of time: (a) Residence in the US for more than 183 days in the course of the year N; (b) Stay of more than 31 days in the course of the year N in the US, if the total of a) this period, plus b) the number of days of residence in N-1 divided by 3, plus c) the number of days of residence in N-2 divided by six, exceeds 183 days;

(iv) If the issuer country of the ID or passport is a US territory;

(v) If the primary address and / or the mailing address (as set forth in part IV d) above) are within US territory

(vi) if at least one of the subscribers is a US Citizen (joint account, as set forth in part IV a) above.

**In case of doubt with respect to their situation re FATCA Regulation, subscribers should consult with their legal or tax advisor.**

# VECTOR

Luxembourg open-ended investment company (SICAV)  
"the Fund"

Trade register No.: R.C. Luxembourg 88.004  
Registered office: 20 Boulevard Emmanuel Servais - L-2535 Luxembourg

49450  
Ed: November  
2015

- My / our primary address and / or mailing address are not within the U.S. territory;
- I / We do not have a U.S. phone or fax number;
- I / We do not have a power of attorney or signatory authority granted to an individual having a primary address and / or mailing address within the U.S. territory.

AND

**(bb)**

- I / We have not a US place of birth
- If I / we ticked ALL the above boxes under (A.2.a.aa.) and (A.2.a.bb.), I am / we are not required to provide the Fund and/or its Agent with any further documentation for FATCA identification purposes;
- If I / we ticked the above box under (A.2.a.bb.) but did not tick any box in section (A.2.a.aa.) above, I / we undertake to provide the Fund and/or its Agent with a W8-BEN form duly filled and electronically signed in accordance with the principles of the US Tax laws;
- If I / we ticked the above box under (A.2.a.bb.) but did tick certain but not all boxes in section (A.2.a.aa.) above, I / we undertake to provide the Fund and/or its Agent with a W8-BEN form duly filled and electronically signed in accordance with the principles of the US Tax laws;
- If I / we did not tick the box in section (A.2.a.bb.) above, I / we undertake to provide the Fund and/or its Agent with a W8-BEN form duly filled and electronically signed in accordance with the principles of the US Tax laws as well as a US nationality renunciation certificate. Should I / we not be in the capacity to provide a US nationality renunciation certificate, then I / we undertake to provide a W9 Form.

For the completion of the foregoing US Tax forms, Individuals are herein requested to provide the Fund and/or its Agent with an email address which shall allow the Fund and/or its Agent to provide you with an internet link, as the case may be:

E-mail: \_\_\_\_\_

**b) If I am / We are Corporate entities:**

If the Corporate entity is a company NOT having its headquarter registered office in the U.S;

AND/OR

If the Corporate entity is NOT a company incorporated in the U.S. (U.S. corporation)

we undertake to provide the Fund and/or its Agent with a W8-BEN-E Form duly filled and electronically signed in accordance with the principles of the US Tax laws (Please note that you are requested to complete the BO Section of the W8-BEN-E Form, when applicable, by indicating the exact US tax payer identification number (TIN)).

**B.** The undersigned subscriber further declares that:

**1. Subscriber (corporate entities)**

**a.** It has the following FATCA Status by ticking the appropriate box, adding its signature. Also, it undertakes the necessary actions to answer to any other request to confirm its status and send immediately to the Fund and/or its Agent the appropriate related US tax Form.

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- Specified US Person
- US Person that is not a Specified US Person
- Luxembourg FI or FI in a jurisdiction having signed an IGA (Registered and reporting FI under an IGA 1 or IGA 2 model)
- Participating FFI (other than case 3) in a jurisdiction not having signed an IGA
- Deemed compliant FFI (other than case 3) (Non registered and non reporting FFI compliant with FATCA under Final Regulations or IGA jurisdictions)
- Exempt beneficial owner (other than case 3)
- Active NFFE
- Passive NFFE
  - non of which controlling persons are US citizens or resident;
  - which controlling persons are US citizens or resident
- Non participating FFI (including a Luxembourg Financial Institution or other Partner Jurisdiction Financial Institutions treated by the IRS as non participating Financial Institutions)

**b.** The undersigned deposit holder confirms, by ticking the corresponding box that:

- YES, it has registered on the IRS Portal its appropriate FATCA Status. Please confirm GIIN Code:

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- NO, it has not registered on the IRS Portal due to its FATCA Status
- It will register later and undertakes to send immediately to the Fund and/or its Agent its FATCA status and GIIN number

## **2. For Passive NFFE with U.S. controlling person(s):**

In case you selected under B.1.a. above "*Passive NFFE with U.S. controlling person(s)*", please provide U.S. Taxpayer identification number (SSN or ITIN) for the ultimate relevant beneficial owner and a W9 Form duly filled and electronically signed in accordance with the principles of the US Tax laws.

**The subscriber herein declares that the information of Section IV of this application form is, to the best of its knowledge and belief, true, correct and complete. Subscriber undertakes to inform the Fund and/or its Agent without delay of any change in his / her / its situation that would make above declaration no longer valid.**

Signed by:

\_\_\_\_\_  
Name [and Title:  
For and on behalf of]

Dated: \_\_\_\_\_

# VECTOR

Luxembourg open-ended investment company (SICAV)  
"the Fund"

Trade register No.: R.C. Luxembourg 88.004  
Registered office: 20 Boulevard Emmanuel Servais - L-2535 Luxembourg

49450  
Ed: November  
2015

Letter on the headed paper of the Mother Company  
to be sent to Edmond de Rothschild Asset Management (Luxembourg)

Edmond de Rothschild Asset Management  
(Luxembourg)  
Attn: Registrar Department  
20 Boulevard E. Servais  
L – 2535 Luxembourg

Date

Dear Sir,

Further to your request, we, [name of the Mother Company], confirm that we are regulated as a [type of organisation (bank, insurance company,...)] by [name of the authority] to carry out the business of [type of activity].

We are able to confirm that:

We have issued an Anti-Money-Laundering Policy (AMLPL). This AMLPL complies with the recommendations of the Financial Action Task Force (FATF) regarding the combating of money laundering and also the special recommendations on Terrorist Financing. The AMLPL covers, among other things, customer identification procedures, establishment of beneficial ownership, reporting of suspicious relationships or suspicious account activity to the competent authorities and due diligence requirements for relationships with politically exposed persons.

We carry out checks to monitor transactions. This monitoring covers, among other things, control of the sources and destinations of funds as well as the purpose and object of transactions in order to ensure detection of any sums of money that may derive from money laundering activities and the financing of terrorism.

The application of the AMLPL by all our entities, subsidiaries and branches is controlled and supervised by our internal auditors, external auditors and regulatory authority.

Consequently, all transactions carried out through Edmond de Rothschild Asset Management (Luxembourg) by our entity [name of the subsidiary or branch of the Mother Company] comply with the above-mentioned criteria.

We hereby certify that we, [name of the Mother Company] and [name of the subsidiary or branch of the Mother Company] cannot be deemed *shell banks*<sup>1</sup> within the meaning accorded to this term under US legislation (USA Patriot Act) and that we shall not use our account held with you for the provision of services to *shell banks*.

Name(s) and position(s)  
of the authorised signatories

Signature(s) and Company's  
stamp

<sup>1</sup> A *shell bank* is defined as follows: a bank registered in a country where it has neither a physical presence (a minimum of one full-time employee) nor an actual address (other than an electronic address or simply a plaque); a bank that does not keep books on site recording its banking transactions and is not regulated by the banking authority that issued its licence to operate. Excluded from this definition are those banks belonging to a banking group that is itself regulated.



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# STANDARD SETTLEMENT INSTRUCTIONS FOR CASH PAYMENTS



Please note that the payments have to be made for the benefit of CACEIS Bank Luxembourg (Swift Code: BSUILULL).



CUR	CASH CORRESPONDENT	CITY	SWIFT CODE	ACCOUNT NUMBER
AED	HSBC Bank Middle East	Dubai	BBMEAEAD	022-111173-437 IBAN : AE770200000022111173437
AUD	Westpac Banking Corporation Intl Div.	Sydney	WPACAU2S	AIS0020979
BGN	UniCredit Bulbank	Sofia	UNCRBGSF	IBAN : BG68UNCR96601044167208
CAD	Canadian Imperial Bank of Commerce	Toronto	CIBCCATT	1811118
CHF	UBS, Zurich	Zurich	UBSWCHZH80A	02300000060737050000Z IBAN : CH540023023006073705Z
CNH	HSBC Hong Kong Limited	Hong Kong	HSBCHKHH	848-028213-209
CZK	Unicredit Bank Czech Republic, a.s.	Prague	BACXCZPP	81527006 IBAN : CZ77 2700 0000 0000 8152 7006
DKK	Den Danske Bank Aktieselskab	Copenhagen	DABADKKK	3007511213
EUR	via TARGET II (MT202)		BSUILULL	
EUR	via TARGET II (MT103)		BSUILULL	LU83007J000000007EUR
GBP	HSBC Bank Plc Intl.	London	MIDLGB22	35210915 Sort Code : 40-05-15 IBAN : GB63MIDL40051535210915
HKD	Standard Chartered Bank	Hong Kong	SCBLHKHH	44709404622
HRK*	Zagrebacka Banka d.d.	Zagreb	ZABAHR2X	IBAN : HR68 2360 0001 9000 00129





CUR	CASH CORRESPONDENT	CITY	SWIFT CODE	ACCOUNT NUMBER
<b>HUF</b>	Unicredit Bank Hungary ZRT	Budapest	BACXHUHB	IBAN : HU43 1091 8001 0000 0001 1704 0007
<b>ILS</b>	Bank Hapoalim	Tel Aviv	POALILITCBS	IBAN : IL680126000000000202668
<b>ISK</b>	Verdis HF	Reykjavik	ESJAISRE	032926464650 IBAN IS94 0329 2646 4650 5810 0801 50
<b>JPY</b>	The Bank of Tokyo-Mitsubishi UFJ	Tokyo	BOTKJPJT	653-0418285
<b>MAD</b>	Attijariwafa Bank	Casablanca	BCMAMAMC	IBAN : 007780000000016290251649
<b>MXN</b>	Banco Santander (Mexico), S.A.	Mexico	BMSXMXMMSSS	156788
<b>NOK</b>	Nordea Bank Norge	Oslo	NDEANOKK	60010209253 Iban : NO4560010209253
<b>NZD</b>	Westpac Institutional Bank	Wellington	WPACNZ2W	RET001188NZD220001
<b>OMR</b>	HSBC Bank Middle East Limited	Ruwi	BBMEOMRX	048-000319-001
<b>PEN</b>	Banco Credito Del Peru	Lima	BCPLPEPL	1931079741073
<b>PLN</b>	Bank Pekao SA	Warsaw	PKOPPLPW	IBAN : PL47124000013104625111120301
<b>QAR</b>	HSBC Bank Middle East Limited	Doha	BBMEQAQX	048-000657-146 IBAN: QA83BBME000000000048000657146
<b>RON*</b>	UniCredit Tiriac Bank SA	Bucharest	BACXROBU	1406310 BAN RO12 BACX 0000 0000 0140 6310
<b>RSD*</b>	Unicredit Bank Serbia JSC	Belgrade	BACXRSBG	1001 44 1 BAN RS35 1700 0000 0100 1441 72



CUR	CASH CORRESPONDENT	CITY	SWIFT CODE	ACCOUNT NUMBER
<b>RUB</b>	ZAO UniCredit Bank	Moscow	IMBKRUUM	Final Bank : Russian Central Bank a/c n°: BIK 044525545 / 30101810300000000545 Bank beneficiary :ZAO UniCredit Bank (IMBKRUUM) a/c n° : 0111810700012180664 INN Number : 7710030411
<b>SEK</b>	Skandinaviska Enskilda Banken	Stockholm	ESSESESS	52018532790 IBAN : SE5350000000052018532790
<b>SGD</b>	Standard Chartered Bank, Singapore	Singapore	SCBLSGSG	0109326105
<b>THB</b>	Hongkong Shanghai Bank	Bangkok	HSBCTHBK	001-106954-980
<b>TRY</b>	Deutsche Bank A.S	Istanbul	DEUTTRISUS	IBAN : TR740011500013004819190010
<b>USD</b>	JP Morgan Chase	New York	CHASUS33	796706786 Chips number : 0002 ABA number : 021000021
<b>ZAR</b>	The Standard Bank of South Africa Ltd	Johannesburg	SBZAZAJJ	7558443

\* For these currencies, please execute the payments for further credit of UniCredit Bank Austria AG (Swift Code : BKAUATWW) for the benefit of CACEIS Bank Luxembourg (Swift Code : BSUILULL, account AT74 1200 0000 1508 9907 for HRK, account AT47 1200 0000 1508 9908 for RON, account AT36 1200 0000 1508 9912 for RSD).

**Please seek professional confirmation before taking any action based on information contained in this document. Please do not hesitate to contact your client services manager.**