

Blockchain Strategies Fund S.C.Sp
A special limited partnership (*société en commandite spéciale*)
Registered office: 30 boulevard Royal, L—2449 Luxembourg
R.C.S. Luxembourg B219.500
(the **Partnership**)

The present Subscription Agreement is submitted to a limited number of potential eligible investors on a confidential basis. The recipient undertakes that neither it nor any of its employees or advisers (as the case may be) shall use the information for any purpose other than for evaluating its future investment in Blockchain Strategies Fund S.C.Sp or divulge such information to any other party. This document shall not be photocopied, reproduced or distributed to others without the prior written consent of Block Asset Management S.à.r.l., acting as the managing general partner (associé gérant commandité) of Blockchain Strategies Fund S.C.Sp

SUBSCRIPTION FORM FOR LEGAL ENTITIES

Please complete this subscription form AND THE KYC FORM B in full using block capitals and black ink and sign it. We reserve the right not to process incomplete or unsigned applications. Your application is subject to the final acceptance of the Partnership represented by its managing general partner. Please return the duly signed form along with all the required identification documents by mail or by fax with the original to follow by mail with the mention “do not duplicate sent by fax on [date]” and without undue delay to:

BANQUE DE PATRIMOINES PRIVES, Registrar and Transfer Agency Service
P.O Box 30, L-2449 Luxembourg | Fax: + 352 26 73 79 33 | Tel. +352 27207935
E-mail: transfer.agent@bbpp.lu

THE ADDITIONAL INVESTOR HEREBY AGREES TO BECOME A PARTY TO AND BE BOUND IN ALL RESPECTS BY THE PROVISIONS OF:

- The Limited Partnership Agreement of Blockchain Strategies Fund S.C.Sp (the "Partnership") as may be from time to time amended ("LPA"), by signing forthwith the LPA;
- The Issuing Document of Blockchain Strategies Fund S.C.Sp currently into force and as may be from time to time amended ("Issuing Document");
- The present Agreement.

Subscription to limited Units in the Partnership

The Investor hereby commits to subscribe to limited Units.

for a total amount equal to: EUR/ USD

THE ADDITIONAL INVESTOR HEREBY DECLARES AND ACKNOWLEDGES:

- To have received and read a copy of the LPA and of the Issuing Document;

- To have reviewed the LPA and the Issuing Document and to understand the risks of, and other considerations relating to, the purchase of Units as well as the investment objectives, policies and strategies of the Partnership;
- To consent to the content of the LPA and of the Issuing Document;
- To have received satisfactory answers and clarifications by duly authorized representatives of the Blockchain Strategies Fund SCSp on all questions raised by the Additional Investor.

That the Partnership has made available to him/her/it all documents that it has requested relating to an investment in the Partnership;

That, in evaluating the suitability of an investment in the Partnership, the Additional Investor has not relied upon any representations or other information (whether oral or written) other than as contained in the foregoing documents or written answers to questions furnished to the Additional Investor by the Partnership and the General Partner, and he/her/it acknowledges that such information has not been supplemented to reflect significant changes in the structure and the terms of the investment (whether or not reflected in this Issuing document).

1. APPLICANT DETAILS

Please complete the information listed below:

Entity name			
Legal form			
Registered office	Attn		
	Street/N°		
	City/Town		
	Post Code		
	Country		
Trade Register		Registration number	
Tel		Fax	
E-mail ¹			
Contact "Person		Position	

2. INVESTMENT DETAILS

You may apply for Units in one or more Sub-Funds by completing the information below. By signing this subscription form, you irrevocably undertake to purchase the Units below:

¹ This Email address will be used to send you the drawdown notices (if applicable) and the convening notices to the general meetings of the Partnership.

Name of Sub-Fund	Class of Units	International security code (ISIN – common code)	Currency (ISO Code)	Invested Amount ²
Blockchain Strategies Fund S.C.Sp EUR	Class EUR	LU1738363925 - 173836392	EUR	
Blockchain Strategies Fund S.C.Sp USD	Class USD	LU1738364063 173836406	USD	

A subscription fee of up to five per cent (5%) may be levied for both classes of Units (i.e. classes of Units denominated in US Dollars and Euro).

The invested amount represents your hard commitment and your total subscription in the relevant Sub-Fund

PAYMENT INSTRUCTIONS

Please use the following bank account(s) details to transfer your subscription payment with reference to the Name of Partnership, Class of Units (if any) invested. Cleared funds should be received before the relevant Cut-Off Time (as defined in the Issuing Document). Payment of your investment must be drawn on a bank account opened in your own name. **No third party payments will be executed.** We reserve the right to not accept a payment executed by a credit institution not governed by AML laws equivalent to those of European laws.

Bank's details	Country	BIC/SWIFT Code
Banque de Patrimoines Privés 30, boulevard Royal, L-2449 Luxembourg	Luxembourg	BBPPLULL

IN EUR :

VIA TARGET

IBAN: LU75 3610 1179 3741 0101
 Swift code: BBPPLULL
 Bank's Name : BANQUE DE PATRIMOINES PRIVES
 In favor of : Blockchain Strategies Fund S.C.Sp

VIA CORRESPONDENT BANK :

IBAN: LU75 3610 1179 3741 0101
 Swift code: BBPPLULLXXX
 Bank's Name : BANQUE DE PATRIMOINES PRIVES
 In favor of : Blockchain Strategies Fund S.C.Sp
 Correspondent Bank : Banque et Caisse d'Epargne Luxbg
 Swift code : BCEELULLXXX
 Bank's full name: Banque et Caisse d'Epargne

IN USD :

IBAN: LU48 3610 1179 3741 0102
 Swift code: BBPPLULLXXX
 Bank's Name : BANQUE DE PATRIMOINES PRIVES

² Certain sub funds or Class of Units may impose **minimum subscription amount** – please refer to the Issuing Document as to the applicable minimum subscription amount.

In favor of : Blockchain Strategies Fund S.C.Sp

Correspondent Bank: IRVTUS3NXXX
 Full name of institution: Bank of New York
 Account nr: 8901 3709 24

3. TERMS&CONDITIONS

1. CORRESPONDENCE

The Investor hereby authorises the “Transfer Agent” to send by email or fax to the Investor the following documents: convening notices to general meetings, information notices, distribution notices, statements of account and any other documents deemed necessary by the Transfer Agent and the Partnership, including, without limitation and information in connection with anti-money laundering inquiries and status.

The Investor acknowledges that email or facsimile is not a secure means of communication and recognises and fully accepts the associated risks pertaining to the sending of documents by the Transfer Agent via email or fax including, without limitation, loss of information, errors, misdelivery, mistransmission, delivery delays (including without limitation those resulting from the Transfer Agent’s systems, networks, processes or procedures), deletions in error (including without limitation those resulting from the Transfer Agent’s systems, networks, processes or procedures), and unwanted access by third parties (including without limitation viruses, falsification, forgery and misuse of data), for which the Transfer Agent shall not be responsible.

The Investor hereby agrees and undertakes that it will be liable for all demands, claims, actions, proceedings, losses, damages or other liabilities and costs and expenses that may arise or which the Transfer Agent may suffer in sending the appropriate document(s) to the addressee as designated by the Transfer Agent. This authorisation shall continue in effect until the Investor informs the Transfer Agent in writing that it wishes to revoke this authorisation.

The investor hereby authorises the Transfer Agent and/or the Partnership to send correspondence by electronic mail or fax to any of the email address/es and/or fax numbers provided to the Transfer Agent, and agree that we may send the Investor communications via these means unless and until we receive written notice from you withdrawing consent for the same.

2. EXCHANGE RATES AND FEES

The Investor hereby acknowledges that if subscription is made and paid in a currency different from the official denomination of the relevant Class (as and when available), such subscription will be processed at the applicable outstanding exchange rate and any applicable exchange fees and expenses will be charged to the Investor.

4. DECLARATIONS

Accuracy of information	<input type="checkbox"/> I certify that all the information provided in this document and in the declaration of beneficial owner is accurate and complete and undertake to immediately notify Banque de Patrimoines Privés if any of the information provided in this document changes (in particular if you have stated that you are an institutional investor and do not qualify as such anymore, change of name, contact, status, structure, ultimate economic beneficiaries...) and submit a new agreement within 30 days.
Subscription Agreement, Issuing Document and	<input type="checkbox"/> I declare that I have read, agreed and understood the contents of this subscription agreement and that I have had the opportunity prior to completing this form to request and read the Issuing Document and Limited Partnership

Limited Partnership Agreement	Agreement of the Partnership. I understand that the subscription for Units is made subject to the terms of such documents and the terms and conditions of this agreement (including the application notes).
Beneficial Owner	<input type="checkbox"/> I hereby confirm that the investment is made on the applicant's own behalf; <input type="checkbox"/> I hereby confirm that the investment is made in my name but on behalf of my clients and that I have identified and verified the identity of underlying clients and their ultimate economic beneficiaries as well as the origin of the money invested. None of such clients and ultimate economic beneficiaries is named on list of prohibited country, territories, entities and individuals maintained by the OFAC, the EU or my financial supervisory authority. <input type="checkbox"/> I am the ultimate economic beneficiary of the Units invested; or <input type="checkbox"/> I am not the ultimate economic beneficiary and I have provided the additional declaration to identify the ultimate economic beneficiaries
Capacity	<input type="checkbox"/> I declare that I have full legal capacity to subscribe in, hold and/or deal with the Units.
Non U.S. Person	<input type="checkbox"/> I hereby declare that Units are not acquired directly or indirectly or on behalf of a US Person as defined in the Issuing Document nor a corporation controlled by, or a majority of whose Units are held by, US Persons or by or on behalf of any person in any other jurisdiction that would be restricted or prohibited to acquire Units. <input type="checkbox"/> I acknowledge that the Partnership is not registered under the U.S. Securities Act of 1933 or other laws governing the U.S. Securities industry.
Transfer Restrictions	<input type="checkbox"/> I agree that the Units cannot be sold or transferred to or for the account of any US Person or in the USA or in or for the account of any person in any other jurisdiction that would be restricted or prohibited to acquire Units.
Origin of funds	<input type="checkbox"/> I confirm that the monies invested do not originate directly or indirectly from illegal or criminal activities and more generally do not contravene to applicable anti-money laundering laws and regulations.
Fax or other electronic transmission	<input type="checkbox"/> I agree that the Partnership and its agents (including Banque de Patrimoines Privés) is authorized to accept and execute any future instructions received by fax and/or electronic instruction without subsequent written confirmation and until written notice of the contrary, the applicant assuming all risks, e.g. those arising from an error in communication or comprehension as well as those arising from fraud and release the Partnership from any liability in that respect.
TAX Compliance	<input type="checkbox"/> I/We confirm that I/we did declare all revenues to the competent tax authorities and that the source of funds is not related to tax evasion in any other jurisdiction.
Eligible Investor	<input type="checkbox"/> I confirm to fulfill the criteria to qualify as an "eligible" investor as per the definition in the Issuing Document and Limited Partnership Agreement.

5. REPRESENTATION AND WARRANTIES

We, the Investor hereby declare, confirm represent and warrant to, and agree with the General Partner (for itself and on behalf of the Partnership) as follows:

- 1) We are knowledgeable, sophisticated and experienced in business and financial matters; we fully understand and agreed with the limitations on Transfer described in the Issuing Document and the LPA; we are able to bear the economic risk of our investment in the Partnership for the

duration of the Partnership, we are presently able to afford the complete loss of such investment and we are under no present or contemplated future need to dispose of any Units to satisfy any existing or contemplated undertaking, need or indebtedness; and we have been afforded access to information about the business and management of the Partnership sufficient to enable us to evaluate our investment in the Partnership.

- 2) We also represent and warrant that: (i) (if the Investor thereunder is not a natural person) the Person we act on behalf of is duly organized, validly existing and in good standing under the laws of the jurisdiction in which it is incorporated; (ii) we have all requisite power and authority to invest in the Partnership, as provided herein; (iii) such investment will not result in any material violation of or conflict with (x) any term of the charter or by-laws applicable or any other organisational document or (y) any instrument by which we are bound or any law or regulation applicable; (iv) such investment has been duly authorised by all necessary action on our behalf; and (v) this Subscription Agreement has been duly executed and delivered on our behalf and constitutes our legal, valid and binding agreement enforceable against us in accordance with its terms, except as the enforcement thereof may be limited by bankruptcy, insolvency (including, without limitation, all laws relating to fraudulent transfers), reorganisation, moratorium or similar laws affecting enforcement of creditors' rights generally and except as enforcement thereof is subject to general principles of equity (regardless of whether enforcement is considered in a proceeding in equity or at law).
- 3) We are not the subject of any bankruptcy or insolvency proceedings, restructuring, receivership, liquidation, administration, proceedings for money laundering or any other proceedings having equivalent effects.
- 4) There are no material actions, proceedings or investigations pending or, to the best of our knowledge, threatened against ourselves or any of our affiliates or ultimate beneficial owner(s).
- 5) We are not relying on the Partnership and the General Partner or any Partnership related thereto, or any of their partners, members, officers, counsels, agents or representatives for legal, investment or tax advice. We will seek independent legal, investment and tax advice to the extent necessary or appropriate in connection with our decision to commit to subscribe in the Partnership.
- 6) All written information which we have provided under this Subscription Agreement is correct and complete as of the date hereof and may be relied upon. Should there be any material change in such information prior to acceptance of this Subscription Agreement, we will immediately provide the Partnership with notice of such change.
- 7) We are aware that personal information given on this Subscription Agreement or otherwise in connection with the Commitment and details of our participation may be disclosed to the General Partner, any other companies affiliated to the General Partner and any delegate thereof, for the purpose of developing and processing the business relationship with us.

CONFIDENTIALITY

The Investor understands, agrees and acknowledges to the use and disclosure of all information relating to the Partnership, including all information contained in the Partnership Documents, this Subscription Agreement and any other Partnership's documentation as well as any reports and accounts (if any) received by the Investor relating to the Partnership notably in accordance with the provisions of the Issuing Document.

DATA PROTECTION

The client is hereby informed and expressly consents, by signing this document, to the processing of the data voluntarily provided in this document to, as well as of any data which might be provided, for the enforcement of the agreement or regarding a query, application, or the contracting of any service or product, even after the end of the contractual relation, to the Partnership, any member of the General Partner or its affiliates (the "Group").

The Partnership (or its General Partner) as data controller; and the Administration Agent; the Investment Manager; the Advisor; the Depositary and/or any of the Partnership's service providers or other third parties when required by law or regulation (Luxembourg or otherwise) as processors, will have access to those personal data provided.

This personal data shall be held on computer and processed by the Partnership, the General Partner or their agents or delegates (as set out in the respective service agreements if any).

Such data will be processed for the purposes of carrying out the services of the Partnership and the General Partner as prescribed by applicable laws such as maintaining the register of Unitholders (or Limited Partners) of the Partnership and providing financial and other information to Unitholders, and to comply with applicable legal obligations including client identification and tax reporting obligations.

- Please, **check this box** in case you accept the processing and communication of your personal data (as client's representative) by the Partnership, for the delivery of information and advertising on the Partnership products and services, or the various Group companies products and offers.

Only to the extent that you have accepted, the accepted purposes include the delivery of information and advertising, including via email, on offers, products, recommendations, services, promotional items, and customer loyalty campaigns of the Partnership and the various Group companies; data extraction and storage, and marketing surveys to adapt our commercial offers to your specific profile, and once the existing contractual relationship ends.

In order to adequately enforce the subscription agreement and be able to offer you services according to your needs, on the basis of the information provided, we will create different profiles based on your interests and needs and on the Group business strategy, and as a result automated decisions will be taken on the basis of these profiles.

The Partnership and the General Partner will take reasonable steps to ensure that all personal data in relation to Unitholders is recorded accurately and maintained in a secure and confidential format. Such personal data will be retained only as long as necessary or in accordance with applicable laws and will only be disclosed to such third parties and agents or delegates as may be permitted under applicable laws or, where appropriate, with the prior consent of the relevant Unitholders. This may include disclosure to third parties such as auditors and the regulators and to agents or delegates of the Partnership and the General Partner who process the data inter alia for anti-money laundering purposes, tax laws and regulations such as, but not limited to FATCA and common reporting standard ("CRS") on OECD and EU levels or for compliance with other Luxembourg legal or regulatory requirements.

Personal data may also be transferred and/or disclosed to any member of the General Partner or its affiliates. Transfers/disclosures will be made in such parties legitimate interest for the purposes of maintaining global client records and providing centralized administrative services and Unitholders' servicing also in countries, where the Partnership is offered to subscription or distributed. As part of the communications described in the previous paragraphs, international data transfers may be made to third parties or international organisations, whether there exists a European Commission decision on their adequacy or not. International transfers to countries that cannot guarantee an adequate protection level shall be made on an exceptional basis and will be made whenever they are necessary for the adequate development of the contractual relationship.

The Group has data protection clauses to adequately ensure the protection of your data as part of the communication and international transfer of your data in countries in which they can be applied.

Should the data provided pertain to physical persons other than the client, the latter guarantees that he/she has obtained and has their prior consent for the communication of their data and has informed them, prior to their inclusion in this document, of the purposes of the data processing, communications, and other terms established herein.

The client guarantees the accuracy and truthfulness of the personal data provided, undertaking to keep them duly updated and to notify any changes in them.

The personal data provided will be kept for the period established on the basis of these criteria: (i) legal obligation of conservation; (ii) term of the contractual relationship and service of any responsibilities derived from said relationship; and (iii) request of removal by the interested party in the applicable cases.

Under the terms and scope established in the regulations in force, any person is entitled to:

- confirm whether the Group is processing personal data that concern you, and access them and the information related to their processing.
- request the rectification of inaccurate data
- request the removal of data, among other reasons, when they are required for the purposes for which they were collected, in which case the Group will cease to process the data except for the filing of or defence against potential claims.
- request the limitation of the processing of your data, in which case they will only be processed with your consent, with the exception of their storage and use for the filing of and defence against claims or for the protection of the rights of another natural or legal person or for reasons of significant public interest in the European Union or in a certain Member State.
- object to the processing of your data, in which case, the Group shall cease to process your data, except for the defence against potential claims.
- receive, in a structured, widely-used format that can be mechanically read, the personal data that concern you and that you have provided to the Group or request that the Group transfer them directly to another controller when technically possible.
- withdraw the consent granted, if applicable, for the purpose above, without affecting the lawfulness of the processing based on consent prior to withdrawal.

The aforementioned rights of access, rectification, removal, limitation, objection, and transferability may be directly exercised by the data owner or its legal or voluntary representative, through a written communication sent to the Partnership or dataprotection@bbpp.lu.

The interested party may file a claim with the CNPD (National Commission for Data Protection) , particularly when it considers that it has not achieved satisfaction in the exercise of its rights, through the website provided for this purpose by the relevant Control Authority.

The client further acknowledges and accepts that the Partnership, the General Partner or the service providers (if applicable) will report any relevant information in relation to the Investor's investment in the Partnership to the Luxembourg tax authorities which will exchange this information on an automatic basis with the competent authorities in the United States or other permitted jurisdictions as agreed in the FATCA Law and the CRS Law, on OECD and EU levels or equivalent Luxembourg legislation.

The Client expressly recognizes that the Partnership (or its General Partner or entities within the Group) will accept no liability with respect to any unauthorized third party receiving knowledge of or having access to such personal data, except in the case of negligence or misconduct by the Partnership (or its General Partner or entities within the Group or any of their partners, officer, director, employees or offices).

6. GOVERNING LAW

The validity, construction and performance of this subscription form will be governed by and construed in accordance with the laws of the Grand Duchy of Luxembourg.

The courts of the District of Luxembourg-City have exclusive jurisdiction to settle any dispute arising out of or in connection with this subscription form, including a dispute regarding the existence, validity or termination of this subscription form.

7. SIGNATURES

If the person(s) sign on behalf of an entity, the signatory/ies declare(s) to be duly authorized to represent such entity.

By signing hereunder, I expressly agree with all provisions mentioned in this subscription agreement:

Name / Denomination	Title	Date (dd/mm/yy)	Signature

8. AML/KYC DOCUMENTS

Please complete the KYC Form B- attached to this subscription form and send it along with the documents you are required to provide in order to subscribe to Units, to **Banque de Patrimoines Privés**. Subscriptions may be accepted temporarily on the basis of the receipt of documents sent by fax but subject to the receipt by mail of the original signed application form and identification documents.

The Partnership reserves the right to reject any application in whole or in part in which event the application monies or any balance thereof will be passed to the applicant at his own risk within fourteen days of the rejection of the application.

Pursuant to the applicable Luxembourg laws and to the circulars of the Luxembourg supervisory authority, obligations have been outlined to prevent the use of undertakings for collective investment such as the Partnership for money laundering purposes. As a result of such provisions, the following identification documents are required to proceed to the subscription:

**KYC FORM B FOR LEGAL ENTITIES
(COMPANIES, PARTNERSHIPS, TRUSTS AND OTHER ENTITIES)**

E-mail: accountopeningta@bbpp.lu

Entity name			
Legal form			
Registered office ³	Attn		
	Street/N°		
	City/Town		
	Post Code		
	Country		
Correspondence address (if different)	Attn / Company		
	Street/N°		
	City/Town		
	Post Code		
	Country		
Tax residence (country)		Tax identification number	
Trade Register		Registration number	
Tel		Fax	
E-mail ⁴			
Contact Person		Position	

8.1. POWERS OF ATTORNEY (IF APPLICABLE)

This power of attorney authorizes Banque de Patrimoines Privés and the Partnership to execute any future instructions received from the following person and for:

Transactions concerned	<input type="checkbox"/> all dealing instructions <input type="checkbox"/> subscriptions only <input type="checkbox"/> redemptions only <input type="checkbox"/> other (please specify): _____
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Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
First name		Last name	
Residential Address ⁵	Street/N°		
	City/Town		

³ PO Boxes or 'care of' addresses are not accepted.

⁴ **This Email address will be used to send you the drawdown notices (if applicable) and the convening notices to the general meetings of the Partnership.**

⁵Evidence of such address may be requested. PO Boxes or 'care of' addresses are not accepted.

	Post Code	
	Country	
Correspondence Address (if different)	Attn / Company	
	Street/N°	
	City/Town	
	Post Code	
	Country	
Tel:		Fax:
E-mail		
Nationality		
Date of birth		Place of birth (city and country)
ID or passport	N°	
	Issued by	
	Issue Date	
	Expiration Date	
Politically Exposed Person	I declare that I am or I have been entrusted with prominent public functions (or to be closely connected to a politically exposed person): <input type="checkbox"/> Yes, please specify: _____ <input type="checkbox"/> No	

8.2. CORRESPONDANCE

Please enter your preferred address for all correspondence (if different from the mailing address provided in Clause 1). P.O. Box can be accepted only if a residential address is provided in Clause 1.

This address will be used to send you confirmation of your holding(s) in the Partnership.

Correspondence Address	Attn / Company	
	Street/N°	
	City/Town	
	Post Code	
	Country	
Tel:		Fax:

8.3. BANK ACCOUNT DETAILS

Please provide your bank account details from **which the subscription amount will be transferred:**

Account holder ⁶	
Bank's details	Bank's name

⁶ The bank account must be in your name. **Payments to a third party other than the investor are not permitted.**

	Street/N°	
	City/Town	
	Post Code	
	Country	
IBAN		
BIC/SWIFT Code		
National Code (e.g. BLZ, BC, Sort code)		
Account number		
Account currency		
Settlement Currency ⁷		

Please provide your bank account details below for the receipt of redemption proceeds, dividends or other payments you may be entitled to, **if different from the bank account mentioned in the previous §**

Account holder ⁸		
Bank's details	Bank's name	
	Street/N°	
	City/Town	
	Post Code	
	Country	
IBAN		
BIC/SWIFT Code		
National Code (e.g. BLZ, BC, Sort code)		
Account number		
Account currency		
Settlement Currency ⁵		

8.4. DIVIDENDS

Dividends (if applicable) should be:

- reinvested
 paid on the bank account provided in Clause 1.3

8.5. REPORTING

Please specify to whom the following reporting should be sent:

Contract note for each transaction	<input type="checkbox"/> to the applicant at his/her correspondence address <input type="checkbox"/> to a third party at the address below
Holding confirmation	<input type="checkbox"/> to the applicant at his/her correspondence address <input type="checkbox"/> to a third party at the address below
	On the following basis:
	<input type="checkbox"/> monthly <input type="checkbox"/> quarterly <input type="checkbox"/> yearly

⁷ Payments will be made in the settlement currency for which **you may bear exchange rate expenses** if different from the reference currency of the Class of Units (or Sub-Fund in the absence of Class of Units) invested or from the currency selected by the Fund or from your bank account's currency.

⁸ The bank account must be in your name. **Payments to a third party other than the investor are not permitted.**

*Third party details: (if applicable)

Name of entity			
Relation with applicant			
Address	Street/N°		
	City/Town		
	Post Code		
	Country		
Contact person			
Tel:		Fax:	
E-mail			

The investor declares by ticking this box that he consents to receive reports (statements of holdings, contract notes, convening notices and drawdown notices, if applicable) by non-encrypted e-mail from BPP. He acknowledges that this information will be sent on a non-secured basis through the internet network and BPP will not be held responsible about potential interception of this information for harmful or fraudulent use.

The following e-mail address(es) should be used in that purpose:

	@	
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By signing hereunder, I declare that:

- I have full legal capacity
- the funds invested do not come from a criminal or unlawful origin and in particular do not constitute the proceeds of money laundering;
- **I acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process the personal data provided to fulfill this document, in accordance with the Data Protection regulations that and the CRS Law, has been informed that Banque de Patrimoines Privés shall process the personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing;**
- all the information provided is true, correct and complete and undertake to provide a new declaration if any information becomes incorrect or changes, within 30 days, even if are data referring to a third person different from the provider, for which has obtained the correspondent consent.

Name / Denomination	Title	Date (dd/mm/yy)	Signature

8.6. AML/KYC DOCUMENTS TO BE PROVIDED:

A. Institutional regulated in an equivalent country :

- Original application Form duly signed by two authorised signatories
- Original Letter of Representation (signed by 2 legal representatives) (if acting for own behalf of third parties) - see section below 1.9.
- Proof of regulation
- List of Authorized Signatories (powers & specimens)
- AML comfort letter
- Copy of the WOLFSBERG questionnaire duly completed (if acting for own behalf of third parties)
- FATCA documentation (i.e. GIIN or W8 form or W9 form) see tax section here below
- CRS Certification document see tax section here below

B. Institutional regulated in a non-equivalent country :

- Original application Form duly signed by two authorised signatories
- Original Letter of Representation (signed by 2 legal representatives) (if acting for own behalf of third parties) - see section below 1.9.
- Proof of regulation
- List of Authorized Signatories (powers & specimens)
- Certified Copy of Articles of Incorporation & Memorandum of Association
- Recent Extract from trade register / Recent certified copy of certificate of incorporation or equivalent document
- Certified Copy of a valid ID Document of the authorised individuals who sign the application form - with first name, name, address, date of birth, nationality
- A full ownership structure up to date & signed of "name of the investor" with the complete names and percentages up to the Ultimate Beneficial Owner(s) (UBO(s)) (Individual holding directly or indirectly 10% or more of the capital/voting rights/control in "name of the investor")
 - If there is any UBOs please provide us with:
 - the signed declaration of ultimate beneficial (see section below)
 - for each ultimate beneficial owner a copy of the identification document (Certified Copy of valid ID Documents with first name, name, address, date of birth, nationality)
 - address' proof ie utility bill
- Copy of the WOLFSBERG questionnaire duly completed (if acting for own behalf of third parties)
- FATCA documentation (i.e. GIIN or W8 form or W9 form) see tax section here below
- CRS Certification document see tax section here below

C. FI with a parent company located/Regulated in a EQUIVALENT COUNTRY:

- Original application Form duly signed by two authorised signatories
- Certified Copy of Articles of Incorporation & Memorandum of Association
- Recent Extract from trade register / Recent certified copy of certificate of incorporation or equivalent document
- List of Authorized Signatories (powers & specimens)
- Certified Copy of a valid ID Document of the authorised individuals who sign the application form - with first name, name, address, date of birth, nationality

- Original Comfort Letter (signed by 2 Directors of the equivalent Regulated parent Company)
- Certified Copy of List of Authorized Signatories of the parent Company
- Proof of Regulation of the parent Company
- Copy of the WOLFSBERG questionnaire duly completed (if acting for own behalf of third parties)
- FATCA documentation (i.e. GIIN or W8 form or W9 form) see tax section here below
- CRS Certification document see tax section here below

D. Other type of investors:

- Original application Form duly signed by two authorised signatories
- Original Letter of Representation (signed by 2 legal representatives) (if acting for own behalf of third parties) - see section below 1.9.
- Proof of regulation
- List of Authorized Signatories (powers & specimens)
- Certified Copy of Articles of Incorporation & Memorandum of Association
- Recent Extract from trade register / Recent certified copy of certificate of incorporation or equivalent document
- Certified Copy of a valid ID Document of the authorised individuals who sign the application form - with first name, name, address, date of birth, nationality
- A full ownership structure up to date & signed of "name of the investor" with the complete names and percentages up to the Ultimate Beneficial Owner(s) (UBO(s)) (Individual holding directly or indirectly 10% or more of the capital/voting rights/control in "name of the investor")
 - If there is any UBOs please provide us with:
 - the signed declaration of ultimate beneficial (see section below)
 - for each ultimate beneficial owner a copy of the identification document (Certified Copy of valid ID Documents with first name, name, address, date of birth, nationality)
 - address' proof ie utility bill
- Copy of the WOLFSBERG questionnaire duly completed (if acting for own behalf of third parties)
- FATCA documentation (i.e. GIIN or W8 form or W9 form) see tax section here below
- CRS Certification document see tax section here below

Any additional document might be asked on a case by case basis

The certification must include the following information: name of certifying entity/person; Date of certification; company stamp of the certifier, statement confirming following " I hereby certify, that this is a true copy of the original"

Document Certification: must be applied and dated by a National or Local Authority, a Police Office, a Post Office, a Notary, a recognized Financial Institution or regulated Financial Intermediary (provided it is submitted to Equivalent identification rules as those applied in Equivalent member countries).

Only regulated Equivalent PSF could act as nominee.

SOURCE OF WEALTH DECLARATION

Professional of the Financial Sector	<input type="checkbox"/> Yes, as regulated by the financial authority of Luxembourg <input type="checkbox"/> Yes, as regulated by the financial authority of an equivalent country ⁹ Financial authority: _____ <input type="checkbox"/> Yes, as covered by a comfort letter from a parent company subject to equivalent AML/KYC requirements as those applied in Luxembourg Name of parent company: _____ Financial authority of parent company: _____ <input type="checkbox"/> None of the above, please complete: Business activity description ((if not disclose in your constitutional document): _____						
Business Activity Description	Please specify _____						
	<input type="checkbox"/> Reinvestment (provide assets sale or certificate sale of securities) <input type="checkbox"/> Benefits (provide supporting documents) <input type="checkbox"/> Own funds (For institutional/private company only) Please add a precise source: _____ <input type="checkbox"/> Other (Please add a precise source) _____ <input type="checkbox"/> I declare that the money invested does not come from a third party and is drawn from my own / the Company's bank account and originates from the following source: _____						
Best estimate of annual regular income	<table style="width: 100%; border: none;"> <tr> <td><input type="checkbox"/> up to EUR 50,000</td> <td><input type="checkbox"/> up to EUR 100,000</td> </tr> <tr> <td><input type="checkbox"/> up to EUR 250,000</td> <td><input type="checkbox"/> up to EUR 500,000</td> </tr> <tr> <td><input type="checkbox"/> up to EUR 1,000,000</td> <td><input type="checkbox"/> more than EUR 1,000,000</td> </tr> </table>	<input type="checkbox"/> up to EUR 50,000	<input type="checkbox"/> up to EUR 100,000	<input type="checkbox"/> up to EUR 250,000	<input type="checkbox"/> up to EUR 500,000	<input type="checkbox"/> up to EUR 1,000,000	<input type="checkbox"/> more than EUR 1,000,000
<input type="checkbox"/> up to EUR 50,000	<input type="checkbox"/> up to EUR 100,000						
<input type="checkbox"/> up to EUR 250,000	<input type="checkbox"/> up to EUR 500,000						
<input type="checkbox"/> up to EUR 1,000,000	<input type="checkbox"/> more than EUR 1,000,000						
Planned frequency of future investment	<input type="checkbox"/> Lump sum <input type="checkbox"/> Daily <input type="checkbox"/> Weekly <input type="checkbox"/> Quarterly <input type="checkbox"/> Yearly <input type="checkbox"/> Other (please specify) _____						
Expected total amount to invest	<input type="checkbox"/> up to EUR 125,000 <input type="checkbox"/> up to EUR 300,000 <input type="checkbox"/> up to EUR 500,000 <input type="checkbox"/> more than EUR 500,000 (please specify): _____						

⁹ Equivalent countries are deemed to be EU countries, EEA countries and third countries that are subject to requirements to fight money laundering or terrorist financing consistent with EU standards and supervised for compliance with such requirements.

Expected period of investment

Short term

Middle term

Long term

By signing hereunder, I declare that:

- I have full legal capacity
- I confirm that the monies invested do not originate directly or indirectly from illegal or criminal activities and more generally do not contravene to applicable anti-money laundering laws and regulations.
- I acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process the personal data provided to fulfill this document, in accordance with the Data Protection regulations that and the CRS Law, has been informed that Banque de Patrimoines Privés shall process the personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.
- All the information provided is true, correct and complete and undertake to provide a new declaration if any information becomes incorrect or changes, within 30 days.

Name / Denomination	Title	Date (dd/mm/yy)	Signature

1.7. TAX INFORMATION

The Tax Regulations⁽¹⁰⁾ currently in force require to collect (via a specific self-certification) additional information from the investor, such as the tax residency, the tax classifications and the citizenship status. Further, as an Account Holder, you are legally required to complete and provide this tax form upon account opening.

In case of any questions regarding the Tax Regulations, please contact your tax adviser or your competent tax authorities.

Please complete all the appropriate sections below and in case of a change in circumstances, provide the updated self-certification including such change. You declare that the information provided is to the best of your knowledge and belief, accurate and complete.

CRS self-certification

Entity's Identification

Company / Branch name :	
Country of incorporation/organization :	
Current registered office address (or Principal Office of effective management)	
Street, n°:	Postal Code :
Town :	Country: Tel. n.:
TAX Residence	
Country of tax residence 1:	Tax Identification Number or equivalent number:
(to fulfill if the Tax Residence is different from registered address and /or if there is several tax residence)	
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
Country of tax residence 2:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
Country of tax residence 3:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	

CRS entity type

<input type="checkbox"/> Financial Institution
If the Accountholder is an Investment Entity , please tick one of the two boxes below:

¹⁰ The term "Tax regulations" refers to regulations created to enable Automatic Exchange Of Information (AEOI). It is not limited but includes the Foreign Account Tax Compliance Act (FATCA) contained in the US Hire Act 2010 and the Common Reporting Standard (CRS) approved by the Organisation for Economic Co-operation and Development (OECD) Council on 15 July 2014 for automatic exchange of financial account information.

A <input type="checkbox"/> Accountholder is an Investment Entity that fulfils all the following requirements (please complete also the section below named "Identification of Controlling Persons")		
<input checked="" type="checkbox"/> Accountholder is resident in a Non-participating Jurisdiction (please specify jurisdiction: _____)		
<input checked="" type="checkbox"/> Gross income of the Accountholder is primarily attributable to investing, reinvesting, or trading in Financial Assets; and		
<input checked="" type="checkbox"/> Accountholder is managed by another Financial Institution.		
B <input type="checkbox"/> Other Investment Entity		
<input type="checkbox"/> Custodial Institution	<input type="checkbox"/> Depository Institution	<input type="checkbox"/> Specified Insurance Company
<input type="checkbox"/> Non-Financial Entity (if the accountholder is a non-financial entity please precise the type by ticking one of the two boxes below)		
<input type="checkbox"/> Active Non-Financial Entity (by reason of income and assets)		
<input type="checkbox"/> Active Non-Financial Entity (the stock of the Non-Financial Entity is regularly traded on an established securities market)		
<input type="checkbox"/> Active Non-Financial Entity (the Non-Financial Entity is a related entity of the Non-Financial Entity the stock of which is regularly traded on an established securities market)		
please provide the name of the regularly traded corporation that the accountholder is a related entity of: _____		
<input type="checkbox"/> Active Non-Financial Entity (Government Entity, International Organisation or a Central Bank)		
<input type="checkbox"/> Other Active Non-Financial Entity		
please specify the status: _____		
<input type="checkbox"/> Passive Non-Financial Entity (please complete also the section below named "Identification of Controlling Persons")		

Identification of Controlling Persons¹¹:

This section is intended to collect information on the Controlling Persons of the Company/Branch that holds an account in the Bank as required by the Luxembourg Law on Automatic Exchange of Information¹² transposing the EU Council Directive (2014/107/UE) with regard to mandatory automatic exchange of information in the field of taxation.

Family name:		First name:	
Nationality :		Date of birth :	
Place of birth (Town or City):		Country of birth :	
Current residence address (street and nr) :			
Town :		Post code :	
Country:			
TAX Residence			
Country of tax residence 1:		Tax Identification Number or equivalent number:	
(to fulfill if the Tax Residence is different from registered address and /or if there is several tax residence)			
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: <input type="checkbox"/>			

¹¹ Under the Luxembourg Law on Automatic Exchange of Information the definition of Controlling Person corresponds to the term "Beneficial Owner" set out in the Financial Task Force Recommendations and means the natural person(s) who exercise(s) control over an entity.

¹² Law dated 18 December 2015 on automatic exchange of information in tax matters

*Country of tax residence 2:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
<i>*Countries of tax residence: to fulfill if the Tax residence is different from residence address and /or if there is several tax residence</i>	

Family name:	First name:
Nationality :	Date of birth :
Place of birth (Town or City):	Country of birth :
Current residence address (street and nr) :	
Town :	Post code :
Country:	
Country of tax residence 1:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
*Country of tax residence 2:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
*Country of tax residence 3:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
<i>*Countries of tax residence: to fulfill if the Tax residence is different from residence address and /or if there is several tax residence</i>	

Family name:	First name:
Nationality :	Date of birth :
Place of birth (Town or City):	Country of birth :
Current residence address (street and nr) :	
Town :	Post code :
Country:	
Country of tax residence 1:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
*Country of tax residence 2:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	
*Country of tax residence 3:	Tax Identification Number or equivalent number:
Tick the box if Tax Identification Number (TIN) or equivalent number is not issued in the country of tax residence: []	

**Countries of tax residence: to fulfill if the Tax residence is different from residence address and /or if there is several tax residence*

Type of control

Please specify the type of control exercised over the Entity by any of the persons listed above that are tax resident in one or more Reportable Jurisdictions.

If the Entity is a legal person (such as a company or a partnership), please complete the table at 1 below. If the Accountholder is a trust or an equivalent legal arrangement, please complete the table at 2 below.

1. If the Entity is a legal person, please complete the table below:

Full name of Controlling Person	Type of control (Please tick one box for each Controlling Person as appropriate)
	<input type="checkbox"/> Control by ownership: _____% <input type="checkbox"/> Control by other means <input type="checkbox"/> Senior managing official
	<input type="checkbox"/> Control by ownership: _____% <input type="checkbox"/> Control by other means <input type="checkbox"/> Senior managing official
	<input type="checkbox"/> Control by ownership: _____% <input type="checkbox"/> Control by other means <input type="checkbox"/> Senior managing official

2. If the Entity is a trust or an equivalent legal arrangement, please complete the table below:

Full name of Controlling Person	Type of control (Please tick one box for each Controlling Person as appropriate)
	<input type="checkbox"/> Settlor (or equivalent) <input type="checkbox"/> Trustee (or equivalent) <input type="checkbox"/> Protector (or equivalent) <input type="checkbox"/> Beneficiary (or equivalent) <input type="checkbox"/> Other
	<input type="checkbox"/> Settlor (or equivalent) <input type="checkbox"/> Trustee (or equivalent) <input type="checkbox"/> Protector (or equivalent) <input type="checkbox"/> Beneficiary (or equivalent) <input type="checkbox"/> Other
	<input type="checkbox"/> Settlor (or equivalent) <input type="checkbox"/> Trustee (or equivalent) <input type="checkbox"/> Protector (or equivalent) <input type="checkbox"/> Beneficiary (or equivalent) <input type="checkbox"/> Other

Automatic Exchange of Information (OECD Common Reporting Standard)

In accordance with the Luxembourg Law on Automatic Exchange of Information¹³ transposing the EU Council Directive (2014/107/UE) with regard to mandatory automatic exchange of information in the field of taxation.

Financial Institutions are required to collect and report to Luxembourg Tax Authorities the following information with regard to Entity Accountholder accounts and (in cases where an entity qualifies or is deemed to qualify as a "Passive NFE") its Controlling Person(s) that are resident in a Reportable Jurisdiction¹⁴ for tax purposes : Entity's name; residence address; jurisdiction(s) of residence for tax purposes; Tax Identification Number(s) (TINs) with respect to each reportable jurisdiction of the Entity as well as (where applicable) its Controlling Person(s)' name, residence address, jurisdiction(s) of residence for tax purposes, Tax Identification Number(s) (TINs) with respect to each reportable jurisdiction, date and place of birth; the account balance or value of the relevant calendar year; the total gross amount of interest, dividends and other income generated with respect to the assets held in the account, in each case paid or credited to the account; the total gross proceeds from the sale or redemption of financial assets paid or credited to the account.

This data will be exchanged with Luxembourg Tax Authorities annually by 30 June of each of the following years covering information for the preceding year.

In this respect the Client will provide the Bank with a signed and dated valid self-certification in order to certify its status, residence(s) for tax purposes and other relevant information such as the TIN(s).

The Client hereby acknowledges to be informed that for the purposes of the Luxembourg Law on Automatic Exchange of Information, the information provided in this form will be processed by the Bank and may be reported to Luxembourg tax authorities for continuation to relevant foreign tax authorities.

Furthermore, its representative, acknowledges that Banque de Patrimoines Privés, acting as data controller, shall process the personal data provided to fulfill this document, in accordance with the law dated 2 August 2002 relating to the protection of individuals with regard to the processing of personal data (the "2002 Law") and Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data ("GDPR") that, according to such regulations and the CRS Law, has been informed that Banque de Patrimoines Privés shall process the personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.

Additionally, certifies that all the statements made in this form are accurate and complete, even if are referring to a third person different from the provider, for which has obtained the correspondent consent.

And finally, undertakes to inform the financial institution of any Change in Circumstances and to provide it with a new signed and dated valid self-certification, highlighting such Change in Circumstances, within 30 (thirty) days from such Change in Circumstances.

Country: _____
Date: _____

Client's Signature(s):

¹³ Law dated 18 December 2015 on automatic exchange of information in tax matters

¹⁴ According to Luxembourg Law on Automatic Exchange of Information a "Reportable Jurisdiction" is a) another Member State of the EU; b). another jurisdiction i) with which an agreement is in place requiring Luxembourg authorities to exchange the information, ii) and which is included in the list of Jurisdictions subject to reporting as (will be) provided by Grand Ducal Decree

1.8 Foreign Account Tax Compliance Act (FATCA)

For further information on this regulation (e.g. definitions), please go to the official portal: <https://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA>

If the entity is a Reporting Foreign Financial Institution incorporated in a country having signed an Intergovernmental Agreement (“IGA”) with the United States of America and is registered on the U.S. Internal Revenue Service (IRS) web portal, **then specify* the corresponding GIIN code here (global intermediary identification number)**

In addition, please provide a:

***W9 Form:** (<http://www.irs.gov/pub/irs-pdf/fw9.pdf>) if the entity is having its registered office in the U.S. or is incorporated in the U.S.

or

***W8 Form:** (<http://www.irs.gov/pub/irs-pdf/fw8bene.pdf>) if the entity is not having its registered office in the U.S. and is not incorporated in the U.S.

***W8 IMY** (<https://www.irs.gov/pub/irs-pdf/fw8imy.pdf>) in case of professional of the financial sector, acting as nominee

Specific FATCA conditions could be found in the Issuing Document of the Partnership.

The account opening and subscriptions into the Partnership(s) are not authorized if you do not provide the above mentioned FATCA documentation (GIIN code or W8 form or W9 form) or the other tax information.

I/We acknowledge that the information (i.e. contained in this account opening form and especially in this tax form and all other required tax information such as the account balance, the amount of revenue and sale proceeds paid or credited to the Financial Account) may be reported to the competent tax authorities, if required.

By signing hereunder, the undersigned declares that:

- to be duly authorized to represent the undersigned entity.
- acknowledges that Banque de Patrimoines Privés, acting as data controller, shall process the personal data provided to fulfill this document, in accordance with the Data Protection regulations that and the CRS Law, has been informed that Banque de Patrimoines Privés shall process the personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.
- all the information provided is true, correct and complete and undertakes to provide a new declaration if any information becomes incorrect or changes, within 30 days..

Name / Denomination	Title	Date (dd/mm/yy)	Signature



1.9. DECLARATION OF ULTIMATE BENEFICIAL OWNERSHIP

Pursuant to the Luxembourg Law of 12 November 2004 on the prevention of money laundering and terrorist financing, as amended ("the Law")

I/we hereby declare that I/we am/are the sole ultimate beneficial owner(s) of the company ("the Company") detailed below:

Name of Company:	
Legal form:	
Country of incorporation:	
Date and place of registration:	
Registered number:	
Address of registered office:	

Of which the equity unit capital is owned beneficially by me/us as follows:

	Beneficial Owner 1	Beneficial Owner 2	Beneficial Owner 3
Percentage holding:			

And my/our personal details are as follows:

	Beneficial Owner 1	Beneficial Owner 2	Beneficial Owner 3
Surname:			
First name:			
Profession:			
Full address:			
Passport/identity card no.:			
PEP (Person exercising an important public or political function, or holding a mandate or related to such a person)	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> YES <input type="checkbox"/> NO
If answer is Yes, please state country:			

I/we attach a certified true copy of the passport(s)/identity card(s) referred to above.

I/we hereby further declare that, to the best of my/our knowledge and belief:

In addition, we represent that the invested funds were not derived from illegal activities as described under the laws of Luxembourg or the recommendations issued by the Financial Action Task Force on Money Laundering (FATF).

We hereby acknowledge that the subscription is made subject to the provisions of the Partnership's Issuing Document and the Limited Partnership Agreement.

I/we hereby undertake to inform Banque de Patrimoines Privés immediately of any change in the information and declarations given above.

Furthermore, I/we acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process the personal data provided to fulfill this document, in accordance with the law dated 2 August 2002 relating to the protection of individuals with regard to the processing of personal data (the "2002

Law”) and Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (“GDPR”) that, according to such regulations and the CRS Law, I/we have been informed that Banque de Patrimoines Privés shall process the personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.

Additionally, I/we certify that all the statements made in this form are accurate and complete, even if are referring to a third person different from the provider, for which has obtained the correspondent consent.

	Beneficial Owner 1	Beneficial Owner 2	Beneficial Owner 3
Signature:			
Date:			

2.0. REPRESENTATION DECLARATION FORM If Professional of the financial sector Regulated in equivalent country acting on behalf of third party(ies).

Name of the Company : _____	
Registered Office address (or Principal Office, if different) Street, : n°/street : _____	
Postal Code:	Town: Country:
Tel number : _____ email address : _____	
Legal form: <input type="checkbox"/> S.A./INC/PLC <input type="checkbox"/> S.a.r.l./Ltd <input type="checkbox"/> Trust <input type="checkbox"/> Other, specify: _____ Capital stock: _____	
Companies register (or equivalent) n° : _____ Country of registration: _____	
Registration Date: _____	US person : <input type="checkbox"/> YES <input type="checkbox"/> NO
<u>Professional Licence</u> Is your Company licensed in your country of domicile ? : YES <input type="checkbox"/> NO <input type="checkbox"/> <input type="checkbox"/>	
Date of issue of the license: _____ Supervisory authority / main regulator : _____	
<p>The Company is a¹:</p> <input type="checkbox"/> Bank / Financial Institution <input type="checkbox"/> Insurance Company <input type="checkbox"/> Professional of the Financial Sector ¹⁵ of the type _____ <input type="checkbox"/> Management Company <input type="checkbox"/> Investment fund <input type="checkbox"/> Pension fund <input type="checkbox"/> Commercial company <input type="checkbox"/> Other: _____	
We are <input type="checkbox"/> not regulated by any authority <input type="checkbox"/> regulated by _____	
whose website / address is as follows: _____	
<p>Incorporated, formed under the laws of _____ and submitted, without limitation, to the following anti-money laundering and legislation (please insert name and reference of applicable legislation):</p> <p>_____</p> <p>_____</p>	

¹In Luxembourg, PFS under the surveillance and regulation of the CSSF (Regulator) are categorised as follows : **Investment firms** : Private portfolio managers, Commission agents, Professionals acting for their own account, Distributors of units/shares of investment funds, Underwriters, Professional custodians of securities, Registrar and transfer agents / **PFS other than investment firms** : Brokers, Market makers, Professionals performing cash-exchange transactions, Financial advisors, Debt recovery, Professionals performing credit offering, Professionals performing securities lending, Administrators of collective savings funds / **PFS performing a connected or complementary activity of the financial sector** : Domiciliation agents of companies, Client communication agents, Administrative agents of the financial sector, IT systems and communication networks operators of the financial sector, Professionals performing services of setting up and of management of companies

We act for our own account
 We act solely for the account of our customers
 We act both for our own account and for the account of our customers

as _____ (Nominee, Transfer agent, custodian, trustee, registrar, other ...)

The Company is :

quoted on the following stock exchange: _____
 not quoted on any stock exchange and the following persons/entities hold more than 25% of its capital :

Person / Entity Name	Residential /Registered Adress	% of ownership

We shall, from time to time, purchase, redeem and hold, units / shares of Luxembourg mutual funds (the Funds) for which you act as Depository Bank, Registrar and Transfer Agent.

We hereby represent to you that:

- We are aware of the terms of the Prospectus of the relevant Funds and we shall not allow unauthorized persons to subscribe or hold units of the funds under the provisions of the Prospectus¹⁶ ;

 We are located in a country that has issued legislation or regulations for the prevention of money laundering and the fight against terrorism and we have in place our KYC policies; we perform transaction controls and we identify all investors and beneficial owners and we obtained appropriate documentation.
- We confirm that we have identified our investors and none of them do not appear on the watch lists published by the European Community and we declares to have realized all controls AML / CFT required by legislation concerning third party on behalf of which we acts as well as the control on the origin of funds
- We confirm that we apply enhanced due diligence procedures for politically exposed persons (“PEP”), an immediate family member or close associate of a PEP or any person or entity resident in, or whose subscriptions monies originate from, a country designated as non-cooperative with international anti-money laundering principles or procedures by the Financial Action Task Force on Money Laundering;
- Hereby, in accordance with the Luxembourg law including the CSSF Regulation N° 12-02 of 14th December 2012 (Art.36), the Grand-Ducal Regulation of 1st February 2010 (Art. 6, par.1 and 2) and the amended law of 12th November 2004 (Art.

¹⁶ For example : US Investor

3-3), we undertake to provide to Banque de Patrimoines Privés, upon request and without delay, a certified copies of identification data and any other relevant documentation relating to the identification of customer and/or beneficial owner of the assets in the account opened in our name for a third party investor.

5. We will retain documentary evidence of the identity of the introduced investor(s) for a period of at least five years from the date of termination of our relationship with them. The company will notify Banque de Patrimoines Privés. immediately of any amendment of information which the Company has forwarded itself on behalf of the final beneficial owner, particularly if we become aware of any introduced investor engaging in activities which lead us to believe that such investor is involved in money laundering or terrorist activities to the extent permitted by our legislation We shall not advertise for clients, solicit clients, nor offer or sell any of the Funds, unless we may do so in compliance with the laws and regulations applicable in our country;
6. We confirm that we have stringent rules and policies in place that safeguard the Partnerships' investors against late trading and market timing¹⁷ practices ;
7. The above representations shall be deemed reiterated at the time of any order placed with you and shall continue throughout the period you will hold investment funds shares/units for us or our customers.

For and on behalf of the Company,

Luxembourg, (date) : _____

Authorized signatures and stamp of the Company:

¹⁷ **Market Timing:** Arbitrage technique by which an investor systematically buys and sells or converts units or shares of the same UCI within a short lapse of time to take advantage of the time difference and/or the imperfections or deficiencies of the UCI NAV calculation.

BLOCKCHAIN STRATEGIES FUND SCSP
FORM OF REVERSE SOLICITATION LETTER

Date: _____

Blockchain Strategies Fund SCSP
30 Blvd Royal
L-2449 Luxembourg
Luxembourg

Dear Sirs:

The undersigned (the "Investor") hereby confirms that the initial approach regarding Blockchain Strategies Fund SCSP (the "Fund"), and the possibility of the Investor becoming an investor in the Fund, was made by the Investor to Block Asset Management Sàrl ("BAM").

The Investor further confirms that:

- (a) it requested, at its own initiative and freely, that BAM provide the Investor with marketing materials related to the Fund;
- (b) that request was not prompted or initiated by BAM or any other person acting on its behalf;
- (c) all correspondence, communications and marketing activities regarding the Fund as between BAM and/or the Fund on the one hand, and the Investor on the other hand, have been and will be at the initiative of the Investor; and
- (d) it has made its own independent assessment and/or taken independent advice in relation to providing this letter, and understands that, since any marketing of the Fund to the Investor has been and will be at the Investor's initiative, the Investor may not benefit from any protections or regulations that may otherwise have been available and/or applied had the Fund been marketed at the initiative of BAM.

Yours sincerely,

Name: _____

Title: _____