



A

General information

Please use block capitals

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

*Mandatory fields

B

Please subscribe units in the following funds

Fund	Amount	Currency*

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

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

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

C

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

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

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

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

For private persons:

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

For entities:

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

* Or equivalent value in your chosen investment currency

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

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

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

For private persons:

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

For entities:

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

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

For private persons:

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

For entities:

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



D

Politically Exposed Person (PEP) NB: Selection required

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

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

No

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

For more information about PEP, please refer to Art. 3 (9) AML4 Directive (EU) <https://eur-lex.europa.eu/legal-content/EN/TXT/PDF/?uri=CELEX:32015L0849&from=EN>

FATCA status NB: Selection required

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

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

E

Information about beneficial owners

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

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

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

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: Country does not issue TIN/equivalent

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: Country does not issue TIN/equivalent

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

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



E

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

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: _____ Country does not issue TIN/equivalent

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: _____ Country does not issue TIN/equivalent

*Mandatory fields

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

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

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: _____ Country does not issue TIN/equivalent

Country of Tax Residence*: _____ Taxpayer Identification Number (TIN)/equivalent: _____ Country does not issue TIN/equivalent

*Mandatory fields

F

Personal Information

We process personal data in order to establish and manage your customer relationship with Storebrand Asset Management AS and determine the correct terms for your agreement. The personal information you have provided to Storebrand is necessary for us to be able to administer your customer relationship with us and fulfil the terms of the agreement. Your personal ID number is necessary for secure identification and correct reporting to public authorities. When we provide investment services, we are required to make audio recordings of all telephone conversations and document other customer communications, such as email and chat. We store the information as long as you are a customer with us. The information is deleted when we no longer have obligations under this agreement or other regulations. You can read more about your rights, such as the right to access, correct and delete information, in our privacy policy on www.storebrand.no/en/security-and-privacy/data-protection. Storebrand Asset Management AS via its managing director is responsible for processing personal data. If you have questions about the processing of personal data, you can send an e-mail to Storebrand's data protection officer: personvernombud@storebrand.no.

Storebrand consists of various companies that provide services within savings, insurance and banking. Storebrand can use information about me across the companies, to provide me with the best possible customer service, customised product recommendations and offers. The information is shared only between the companies in Storebrand. Consent can be withdrawn on my customer profile on skagenfondene.no.

Yes No



G

Signing

Your client relationship is with Storebrand Asset Management AS. The undersigned hereby confirms that I have examined and accepted the contents of the fund's PRIIPs KID/UCITS KIID, Storebrand Asset Management AS' General Commercial Terms as well as the conditions set out in this form (4 pages). I hereby authorise Storebrand Asset Management AS to make the PRIIPs KID/UCITS KIID available to me on www.skagenfunds.com. The General Commercial Terms can be found here: www.skagenfunds.com/globalassets/pdfs/general-commercial-terms/general-commercial-terms-english.pdf.

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

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

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

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

*Mandatory fields



Please send complete and signed form by post to:

SKAGEN Funds, P.O. Box 160, 4001 Stavanger, Norway

or by e-mail to: contact@skagenfunds.com



Important information

All information and documentation referred to below must be delivered to Storebrand Asset Management AS before orders from new clients may be processed.

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

Certified copy

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

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

Costs

There are no costs related to the subscription or redemption of units in SKAGEN Funds.

Costs related to your client relationship in Storebrand Asset Management AS is set out in Storebrand Asset Management AS' General Commercial Terms, as they apply at all times.

For further cost information for the countries in which SKAGEN Funds are authorised to be marketed, please visit www.skagenfunds.com.

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



Internet portal "My Page"

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

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

The art of common sense

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