

# **TF** TradeWell CAPITAL

TradeWell Capital Fund is an initiative of TradeWell Capital B.V.

## SUBSCRIPTION FORM INDIVIDUAL

**Attention! This investment falls outside AFM supervision.  
No license and no prospectus required for this activity.**



## SUBSCRIPTION PROCEDURE



Submit your  
subscription



Your subscription is  
being processed



Transfer your  
subscription amount



You are participating in  
the Fund

The information you provide in this form is required to process the subscription. Some of the questions arise from legal obligations to mitigate risks with regard to money laundering and terrorism financing. This requires, for example, to obtain insight into the Investor's background and the origin of the money to be invested in the Fund. The information will be shared with AssetCare, the Administrator of the Fund. AssetCare will process the subscription and will contact you in case additional information is required.



Words and expressions in this form starting with a capital letter have the meaning explained in Annex I of the Information Memorandum.

Please do not hesitate to contact the Administrator on +31 (0)20 244 27 15 or [investors@assetcare.nl](mailto:investors@assetcare.nl) should you need help completing this form and/or if you have any questions regarding it.

## INFORMATION ABOUT TRADEWELL CAPITAL FUND

The documentation below provides important information about the characteristics of the Fund, such as the investment policy and the risks involved.

TradeWell Capital Fund

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→ Information Memorandum (IM)

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→ Key Information Document (KID)

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→ Terms & Conditions (Terms - Annex 2 of the IM)

It is recommended to carefully read and save the documents beforehand, so that you may consult them at any time.



Do you want to open a webpage from this form? Make sure this form is saved beforehand to avoid that the data that you have entered is lost.

## INVESTOR DETAILS

Please enter the information in the table below.

|  | First Investor |               | Second Investor <sup>1</sup> |               |
|--|----------------|---------------|------------------------------|---------------|
| First and last name                        |                |               |                              |               |
| Email address                              |                |               |                              |               |
| Phone number                               |                |               |                              |               |
| Address                                    |                |               |                              |               |
| Postal code                                |                |               |                              |               |
| City                                       |                |               |                              |               |
| Country of residence                       |                |               |                              |               |
| Nationality                                |                |               |                              |               |
| BSN/Tax Identification Number <sup>2</sup> |                |               |                              |               |
| Passport Number <sup>3</sup>               |                |               |                              |               |
| Date of Birth                              |                |               |                              |               |
| Birthplace                                 |                |               |                              |               |
| Country of birth                           |                |               |                              |               |
| Employment type                            | Employed       | Self-employed | Employed                     | Self-employed |
|  | Retired        | Student       | Retired                      | Student       |
|  | None           |               | None                         |               |
| Occupation <sup>4</sup>                    |                |               |                              |               |
| Name employer <sup>4</sup>                 |                |               |                              |               |
| City of employer <sup>4</sup>              |                |               |                              |               |
| Sector <sup>4</sup>                        |                |               |                              |               |

Could you please indicate how you came into contact with TradeWell Capital Fund? If this was through a person and/or organization, could you elaborate on your relationship with this person and/or organization?

<sup>1</sup> This is required only if it is desired for the subscription to be in joint names as tax partners.

<sup>2</sup> Enter your BSN or the tax identification number (personal number) if you are a tax resident outside the Netherlands.

<sup>3</sup> Fill in the document number of your passport or ID card.

<sup>4</sup> Enter the details of your current profession (or most recent profession if you currently do not have a profession) or leave it blank if you have no work experience yet.

## SUBSCRIPTION



The minimum subscription amount is € 250,000. Please also note that Subscription Costs of 0.5% of the gross subscription amount may apply. The name associated with the bank account from which the subscription amount is transferred must match the name(s) of the Investor. This form must be received no later than five (5) business days before the respective Transaction Date.

Please indicate the subscription amount and from which bank account the deposit will be made.

|                     |         |         |  |
|---------------------|---------|---------|--|
| Subscription amount | €       |         |  |
| IBAN / bank account |         |         |  |
| Account holder name |         |         |  |
| Class 1             | Class 2 | Class 3 |  |

Each Unit Class has its own fee structure. More information on this can be found in section 13 of the IM.

## DEPOSIT INSTRUCTIONS



The issuance of Units is then carried out in accordance with the methodology described in the IM. The Transaction Date of the Fund is typically on the first business day of the month. Once the subscription is processed, you will receive a Transaction Note with an overview of your Units.

You will receive the deposit instructions from AssetCare ([investors@assetcareportal.com](mailto:investors@assetcareportal.com)) after your subscription has been approved.

## GENERAL

The following questions are intended to provide further insight into your subscription.

|   | First Investor |    | Second Investor <sup>5</sup> |    |
|---|----------------|----|------------------------------|----|
| Are you a PEP (Politically Exposed Person)? | Yes            | No | Yes                          | No |
| Are you a U.S. Person?                      | Yes            | No | Yes                          | No |



Please see this [this webpage](#) for more details about (Pseudo) UBO('s), PEP's and U.S. Persons.

<sup>5</sup> This is required only if it is desired for the subscription to be in joint names as tax partners.

## SOURCE OF FUNDS TO BE INVESTED



The Money Laundering and Terrorist Financing (Prevention) Act (Wwft) requires fund managers to, amongst others, identify their Investors, report unusual transactions and have insight in the source of funds. There is also an obligation to keep investor's files up to date.

In the context of these regulations, we kindly ask you to complete the information below.

|   |     |    |
|---|-----|----|
| Do you expect to make multiple subscriptions? | Yes | No |
|---|-----|----|

↳ If so, can you explain this further (frequency and expected amounts)?

|  |     |    |
|--|-----|----|
| Do you expect to make interim redemptions? | Yes | No |
|--|-----|----|

↳ If so, can you explain this further (frequency and expected amounts)?

Select the sources below that explain the origin of the funds and include the percentage of each source. The total of the percentages should be 100%.

|                        |   |                         |   |
|------------------------|---|-------------------------|---|
| Salary                 | % | Savings                 | % |
| Entrepreneurial income | % | Income from investments | % |
| Inheritance/gift       | % | Property                | % |
| Retirement benefits    | % | Family wealth           | % |
| Other:                 |   |                         | % |

Additional information is needed regarding the (justification of the) source of funds.

To fully assess your subscription, we kindly request that you provide a textual explanation below. Additionally, we would appreciate receiving documentation for verification, such as a pay slip or the most recent income tax return.



Please see [this webpage](#) for more information about the different sources of funds. Please note that this form should be saved before opening a webpage.

DECLARATION OF TAX RESIDENCY

Under the Foreign Account Tax Compliance Act ("FATCA") and the Common Reporting Standard for Automatic Exchange of Financial Account Information ("CRS"), it is mandatory to (I) ask where you are subject to taxation and (II) report certain tax-relevant information to the Dutch tax authorities and, in some cases, (through the Dutch tax authorities) to foreign tax authorities.

|   | First Investor |    | Second Investor <sup>6</sup> |    |
|---|----------------|----|------------------------------|----|
| Are you subject to taxation in the Netherlands? | Yes            | No | Yes                          | No |

Are you subject to taxation in the United States?

You are not subject to taxation in the United States

I declare that I am not a U.S. citizen and that I am not a resident of the United States for tax purposes.

I hereby confirm that I was born in the United States (or on U.S. territory), but that I am no longer a U.S. citizen and that I have voluntarily relinquished my U.S. citizenship.

Please attach: a copy of the "Certificate of Loss of Nationality of the United States".

You are subject to taxation in the United States

I hereby confirm that I am a U.S. citizen and/or a resident of the United States for tax purposes (green card holder or resident under the substantial presence test).

My "U.S. federal taxpayer identifying number" (U.S. TIN) is:

Are you, solely or jointly, a tax resident of a country other than the Netherlands and the United States?

|                           |   |
|---------------------------|---|
|                           | 1 |
| Country                   | 2 |
|                           | 1 |
| Tax identification number | 2 |



Please see [this webpage](#) for more details about (Pseudo) UBO('s), PEP's and U.S. Persons.

<sup>6</sup> This is required only if it is desired for the subscription to be in joint names as tax partners.

## REQUIRED DOCUMENTS

Below is an overview of the documents that are at least required to process the subscription.

### Individual or joint subscription

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A fully completed and signed subscription form

A copy of an identity document <sup>7,8</sup>

A copy of a recent bank statement to verify the IBAN, account name and address (not older than 3 months)

Documentation to substantiate source of funds (such as a salary slip, most recent Income tax return or any other document that verifies the source of funds)



AssetCare will contact you by phone or email should additional information or documentation be required to process your subscription.

Any costs associated with depositing the subscription fee into the account of the Legal Owner are your responsibility.

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<sup>7</sup> Required for both the first Investor as the tax partner in case of a joint subscription.

<sup>8</sup> Passport, (Dutch) ID card or (European) driver's license. A copy of both the front and back side is required for an ID card and driver's license.

SIGNATURE PAGE

By signing the Subscription form you declare that you:

- have truthfully completed the Subscription Form;
- will communicate changes to data in this form within thirty days via the Amendment Form;
- have read the IM, the KID and the Terms & Conditions;
- understand and accept the information and conditions outlined in the IM, the KID and the Terms & Conditions;
- understand and accept the risks associated with investing in the Fund, which risks are inter alia further described in chapter 6 of the IM;
- (for Investors which are not residents of the Netherlands) have not been approached by Fund Manager or any other party for an investment in the Fund, that no marketing has taken place towards you for an investment in the Fund and that you are subscribing for Units at your own initiative;
- subscribe for Units for your own account against a total subscription amount as stated above under the heading 'SUBSCRIPTION' and to acquire and hold them for your own account;
- agree that the Fund Manager will use and process the information you provide in accordance with the privacy statement which can be found at [privacy statement](#), including the administration of the Fund and to comply with legal obligations;
- agree that Fund Manager will process your data to comply with anti-money laundering laws and other legal obligations, ensuring strict confidentiality. Fund Manager and Legal Owner will comply with applicable data protection laws, including the GDPR, when processing your personal data.
- agree that data may be shared with third parties listed in the IM if required for these parties to comply with legal obligations;
- agree that data may be disclosed to the Dutch tax authorities for the purpose of CRS and FATCA;
- agree that, in accordance with the requirements of the 'Implementation Act on Registration of Ultimate Beneficial Owners of Trusts and Similar Legal Arrangements', Fund Manager will provide data to the Trade Register for the purpose of the so-called 'UBO Register trusts';
- agree that all information relating to the Fund will be provided either via the Website or by email;
- agree that the Fund Manager will use your data to – next to the reports as described in the IM – periodically provide information regarding the Fund, your Units in the Fund and other investment related matters; and
- are aware that the Fund is not subject to the supervision of the AFM according to Article 2:66a of the Financial Supervision Act.

This form and the required documents will be used to process your subscription and perform subsequent services. The subscription cannot be processed if the subscription form is incomplete.

|                         | First Investor |  | Second Investor <sup>9</sup> |
|-------------------------|----------------|--|------------------------------|
| Date                    |                |  |                              |
| City                    |                |  |                              |
| Name                    |                |  |                              |
| Signature <sup>10</sup> |                |  |                              |

<sup>9</sup> This is required only if it is desired for the subscription to be in joint names as tax partners.

<sup>10</sup> Whether you can provide a digital signature depends on the program you use to open the file and your settings. Unable to provide a digital signature? In that case, print out the form, sign by hand, and scan or photograph the signed document.

## SUBMIT YOUR SUBSCRIPTION

Please send a signed form to [investors@assetcare.nl](mailto:investors@assetcare.nl) (with [info@tradewellcapital.nl](mailto:info@tradewellcapital.nl) in CC) or by regular mail to AssetCare. You will be notified by email when your subscription is received and being processed and/or should we need additional information.



Submit your  
subscription



Your subscription is  
being processed



Transfer your  
subscription amount



You are participating in  
the Fund

Please contact if you need any help completing the subscription form and/or have any questions about this form:



+31 (0) 20 244 27 15

Available each working day from  
08:00 to 18:00



[investors@assetcare.nl](mailto:investors@assetcare.nl)

Our aim is to answer your email  
within 24 hours



AssetCare

Mondriaantoren  
Amstelplein 40 C  
1096 BC Amsterdam

Fund Manager and Administrator will protect the privacy of the Investors in the Fund. All privacy-sensitive information that is provided is subject to the privacy statement. Fund Manager and Administrator make reasonable efforts to keep this information confidential and to use it only for the purposes described in the privacy statement. Fund Manager and Administrator work in accordance with the privacy legislation (GDPR). In order to process a subscription, Fund Manager and Administrator need information such as name and email address. These details may also be used to keep you, as Investor in the Fund, informed of the developments in the Fund or to send you other information that may be of interest to you. This is optional and you are free to opt out (or opt in) to this service at any time.

Fund Manager or Administrator will not disclose Investors' information to third parties without permission, other than to the parties listed in the IM or unless otherwise required by law.

Fund Manager and Administrator reserve the right to modify the privacy statement in the event there are changes in its policy or business operations or in case law or case law warrant it.

Please feel free to contact the Administrator or Fund Manager in case you have any questions or comments about the privacy statement.