



# T.RowePrice

## Select Investment Series III SICAV

# New Account Registration Form

- Review the fund prospectus of the SICAV and KID of the relevant share class before completing this registration form. Contact your financial intermediary for the latest prospectus and KID plus a list of the sub-funds and share classes currently available in your jurisdiction.
- Terms not defined in this form shall have the meaning given to them in the prospectus of the SICAV.
- Your account will not be opened (nor will you be able to receive distributions or redemption proceeds) until we have received all required materials as described in section "Submitting Your Application" at the end of this document.

## 1. Account Holder *Print clearly in BLOCK CAPITALS using dark ink*

NAME OF ACCOUNT HOLDER (ENTITY OR INDIVIDUAL)			
E-MAIL			
PHONE ▶ <i>With local and international codes</i>	FAX ▶ <i>With local and international codes</i>	AGENT CODE	ACCOUNT DESIGNATION

### Registered Address *Cannot be a post box or "in care of" address*

ADDRESS	
CITY/POSTCODE	COUNTRY

### Mailing Address Same as registered address

ADDRESS	
CITY/POSTCODE	COUNTRY

### Contact Person Same as account holder's name above

NAME		
E-MAIL		
POSITION	PHONE ▶ <i>With local and international codes</i>	FAX ▶ <i>With local and international codes</i>

### Type of Entity *Complete ONLY if the account holder is an entity.*

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Bank/financial institution | <input type="checkbox"/> Investment/mutual fund     | <input type="checkbox"/> Corporation SA, Ltd, etc.                      |
| <input type="checkbox"/> Government body            | <input type="checkbox"/> Trust                      | Does the share capital include bearer shares:                           |
| <input type="checkbox"/> Pension fund               | <input type="checkbox"/> Distributors               | <input type="checkbox"/> Yes <input type="checkbox"/> No                |
| <input type="checkbox"/> Insurance company          | <input type="checkbox"/> Platforms (execution only) | <input type="checkbox"/> Other:   |
| <input type="checkbox"/> Charity/foundation         |   | <div style="border: 1px solid black; height: 20px; width: 100%;"></div> |

### Eligibility of Entity *Complete ONLY if the account holder is an institutional investor.*

- The account holder is an institutional investor (within the meaning of Article 174 of the Luxembourg law of 17 December 2010) eligible to buy E, I and S share classes as defined in the prospectus.

### Estimated Level of Investment *Complete for monitoring purposes (will not be processed as a deal instruction)*

CURRENCY	AMOUNT	COMMENTS (optional)
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**Purpose and intended nature of the business relationship:**

Investing for investment returns  Other

**Expected holding period**

0-3 years  4-6 years  7+ years

**Reporting Currency** *Please select the currency you wish to receive statements and valuations in.*

EUR  GBP  
 USD  Base Currency of the Class

**2. Ultimate Beneficial Ownership Declaration**

- We the account name holder hereby confirm in respect to our relationship with the funds that we are **acting on our own behalf** OR
  - We the account name holder hereby confirm in respect to our relationship with the funds that we are acting on **behalf of a third party**. If account holder is not the beneficial owner of the shares, complete the intermediary section of the registration form;
- If acting on behalf of a third party, please indicate also the nature of your services in relation to your clients:
- Advisory**
  - Discretionary**
  - Platform (execution only)**
  - Other, intermediary**

- Please **consider** the statements at the start of each section and tick the relevant declaration;
- **Important** you must fully complete the section against which you make the declaration otherwise the form will be rejected;
- **Refer to section 2.2**, If the investing entity is a Trusts, Foundations and similar legal arrangements;
- If needed, **please add additional** beneficial owners on a separate sheet;
- **Provide** a certified true copy of a valid passport or government issued ID for the individual(s) named within this form;

**Legal Person**

**2.1. Statements and Form for Legal Persons**

- (A) If a public authority or public body refer directly to **sections “2.1.3” and “Signatures”**;
- (B) I/we declare that the investing entity or on whose behalf a transaction or activity is being conducted, is a company whose shares are admitted to trading on a Regulated Market<sup>1</sup> (This box does not apply to subsidiaries including wholly owned; please complete an alternative box). ▶ **Complete section 2.1.1 and “Signatures”**
- (C) I/we declare there is a natural person(s) who ultimately owns or controls (directly or indirectly) equal or greater than 25% of the value of the shares, voting rights or ownership in the investing entity or on whose behalf a transaction or activity is being conducted, including through bearer shares. ▶ **Complete section 2.1.2 and “Signatures”**
- (D) I/we declare there is a natural person(s) who owns or control(s) by other means (a) the investing entity or (b) the party on whose behalf the transaction or activity is conducted. ▶ **Complete section 2.1.2 and “Signatures”**
- (E) I/we declare there is **no** natural person(s) who ultimately owns or controls (directly or indirectly) equal or greater than 25% of the value of the shares, voting rights or ownership in the investing entity or on whose behalf a transaction or activity is being conducted, including through bearer shares or through control by other means<sup>2</sup>. ▶ **Complete section 2.1.3 and “Signatures”**

**2.1.1. Listed on a Regulated Market**


STOCK EXCHANGE IDENTIFIER	COUNTRY IN WHICH THE ENTITY IS TRADED
FULL NAME OF THE REGULATED MARKET	

<sup>1</sup> Listed companies on a regulated market in the European Union, the European Economic Area, or in another third country that imposes obligations recognised as equivalent by the European Commission need only to disclose on which market they are listed as per EU Directive 2004/109/CE requirements;

<sup>2</sup> for example, through a shareholder’s agreement, the exercise of dominant influence or the power to appoint senior management;

## 2.1.2. Control by Ownership or Control by other Means

### Beneficial Owner 1 – Control by ownership or Control other means

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
FOR "CONTROL BY OWNERSHIP" INDICATE PERCENTAGE OWNERSHIP:	
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY
If controlled by other means, please provide below an explanation on how the control is derived such as for example through a shareholder's agreement, the exercise of dominant influence or the power to appoint senior management. Please note depending on the details provided we may require further information or documentation:	
	

### 2.1.3. Senior Managing Official

In the event that statements C) or D) above do not apply, a Senior Managing Official<sup>iii</sup> will be recorded as the "Ultimate Beneficial Owner – Senior Managing Official", as defined in Directive (EU) 2015/849.

#### Senior Managing Official

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
BUSINESS ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY
NAME OF COMPANY	POSITION IN COMPANY

## Trusts, Foundations and similar legal arrangements

### 2.2. Form for Trusts, Foundations and similar legal arrangements

- Please complete sections 2.2.1, 2.2.2 or 2.2.3 in block capitals;
- If an **employee's pension, superannuation or similar scheme** please complete section 2.2.3 **only**;
- If needed, please add additional Protectors, Settlers, Trustees, Beneficiaries or Controllers on a separate sheet;
- Unless specifically stated below, please provide a certified true copy of a valid passport or government issued ID for the individual(s) named below;

<sup>iii</sup> Senior Managing Official means any natural person(s) responsible for strategic decisions that fundamentally affect the business practices or general direction of the legal entity/vehicle and any natural person(s) who exercises executive control over the daily and regular business of the legal entity/vehicle through a senior management position, Chief Executive Officer (CEO), Chief Financial Officer (CFO), Managing or Executive Director, President or Chairman;

## 2.2.1. Protector, Settlor, (un)defined beneficiaries, Trustees

### Protector

I/we declare there is no protector

I/ we declare there is a protector (please complete the below information)

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY

### Settlor

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY

I/we declare the settlor has deceased [no ID will be required]

### Defined Beneficial Owner (entitled to 25% or more of the legal arrangement)

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY


In the event all beneficiaries have not been designated please provide below the category of persons for which the trust or Foundation is to benefit:



### Individual Trustee (if applicable)

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY

### Corporate Trustee (if applicable)

COMPANY NAME	DATE OF INCORPORATION
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
BUSINESS ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY
IDENTIFICATION NUMBER	
With respect to the Corporate Trustee above, please tick one of the below boxes and complete the Corporate Trustee Beneficial Owner section immediately below in block capitals:	
<input type="checkbox"/> 1) I/we declare there is a natural person(s) who ultimately owns or controls (directly or indirectly) equal or greater than 25% of the value of the shares, voting rights or ownership in the Corporate Trustee, including through bearer shares.	
<input type="checkbox"/> 2) I/we declare there is a natural person(s) who control(s) the Corporate Trustee by other means (add explanation below);	
<input type="checkbox"/> 3) I/we declare there is no natural person(s) who ultimately owns or controls (directly or indirectly) equal or greater than 25% of the value of the shares, voting rights or ownership in the Corporate Trustee, including through bearer shares or through control by other means.	
(Applicable to box 2 only) If controlled by other means, please provide below an explanation on how the control is derived such as for example through a shareholder's agreement, the exercise of dominant influence or the power to appoint senior management. Please note depending on the details provided we may require further information or documentation:	
	

### In respect to Corporate Trustee Beneficial Owner, please complete this section

COMPANY NAME	
DATE OF INCORPORATION (DD-MM-YYYY)	IDENTIFICATION NUMBER
PLACE OF BIRTH	IDENTIFICATION NUMBER
PERCENTAGE OWNERSHIP	(APPLICABLE TO BOX 3 ONLY) POSITION IN THE COMPANY:
BUSINESS ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY

### 2.2.2. Control by other Means of trusts or similar legal arrangements

#### Control by Ownership or by other Means

- I/we declare there is no other natural person exercising ultimate control or influence over the legal arrangement by means of direct or indirect ownership or by any other means,
- I/we declare there is another natural person exercising ultimate control or influence over the legal arrangement by means of direct or indirect ownership or by any other means (please complete the below section)

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
RESIDENTIAL ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY

### 2.2.3. Senior Managing Official (including employee's pension, superannuation or similar scheme)

A Senior Managing Official<sup>iii</sup> will be recorded as the "Ultimate Beneficial Owner – Senior Managing Official", as defined in Directive (EU) 2015/849. A Senior Managing Official may be recorded as Ultimate Beneficial Owner of an employee's pension, superannuation or similar scheme where the following conditions are met: a) provides retirements benefit for employees; b) where contribution are made by an employer by way of deductions from employee's wages and; c) scheme rules do not permit assignment of members interest under the scheme.

#### Senior Managing Official

SURNAME	FIRST NAME(S)
DATE OF BIRTH (DD-MM-YYYY)	NATIONALITY
PLACE OF BIRTH	IDENTIFICATION NUMBER
BUSINESS ADDRESS (PO OR C/O WILL NOT BE ACCEPTED)	
STREET AND NUMBER	CITY / TOWN
POSTCODE / ZIP CODE	COUNTRY
NAME OF COMPANY	POSITION IN COMPANY

### 3. Tax Residency of Account Holder *ALL account holders must complete. Additional information may be required.*

ACCOUNT HOLDER'S PRIMARY COUNTRY OF TAX RESIDENCE	TAX ID NUMBER IN THAT COUNTRY
ACCOUNT HOLDER'S COUNTRY OF INCORPORATION	ANY OTHER COUNTRIES OF TAX RESIDENCE AND THEIR TAX ID NUMBERS

Is the account holder a tax resident of the US?

- Yes *Attach a completed W9 form, available at [irs.gov/pub/irs-pdf/fw9.pdf](https://irs.gov/pub/irs-pdf/fw9.pdf), and proceed to Section 6.*
- No *If an entity, complete the appropriate sub-section below (Section 4 A, B or C).*

### 4. FATCA Self-Certification *Complete ONLY if the account holder is an entity.*

#### A. Entities With Their Own Global Intermediary Identification Number (GIIN)

GIIN
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Entity's category:

- Participating Financial Institution
- Registered Deemed Compliant Financial Institution
- Direct Reporting NFFE
- Reporting Financial Institution under the Luxembourg IGA
- Reporting Financial Institution under IGA of the following Partner Jurisdiction:

#### B. Entities Using a Sponsor's GIIN

GIIN	SPONSOR ORGANISATION
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Entity's category:

- Sponsored Investment Entity or Controlled Foreign Corporation
- Sponsored Direct Reporting NFFE
- Sponsored Closely Held Investment Vehicle

#### C. Entities Without a GIIN

Entity is not able to, or does not need to, provide a GIIN because it is:

- Waiting to receive a GIIN for which it has applied *Indicate entity's category in Sub-section A above.*
- A Certified Deemed-Compliant Financial Institution under a Model 2 IGA or Non-Reporting Financial Institution under a Model 1 IGA
- An Exempt Beneficial Owner
- A Territory Financial Institution
- A Non-Participating Financial Institution
- An Active NFE under the Luxembourg IGA
- A Passive NFE *See box on last page of application for requirements about controlling person information.*

<sup>iii</sup> Senior Managing Official means any natural person(s) responsible for strategic decisions that fundamentally affect the business practices or general direction of the legal entity/vehicle and any natural person(s) who exercises executive control over the daily and regular business of the legal entity/vehicle through a senior management position, Chief Executive Officer (CEO), Chief Financial Officer (CFO), Managing or Executive Director, President or Chairman;

## 5. Common Reporting Standard Self-Certification Tick only one box.

**Note:** Relevant information can be found at the OECD automatic exchange of information portal at <http://www.oecd.org/tax/automatic-exchange/>.

If you have any questions then please contact your tax adviser or domestic tax authority.

### 1. Financial Institution - Investment Entity

- (a) Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution *(Note: if you tick this box, please include individual self-certification forms for each Controlling Person)\**
- (b) Other Investment Entity

### 2. Financial Institution

- (a) Depository Institution
- (b) Custodial Institution or
- (c) Specified Insurance Company

### 3. Active Non-Financial Entities

- (a) Entity which is regularly traded on an established securities market or a related entity of such an entity
- If you have ticked 3(a), please provide the name of the established securities market on which the corporation is regularly traded: \_\_\_\_\_.
  - If you are a Related Entity of a regularly traded corporation, please provide the name of the regularly traded corporation that the Entity in 3(a) is a Related Entity of: \_\_\_\_\_.
- (b) Government entity
- (c) Central Bank
- (d) International organization
- (e) Active Non-Financial Entity other than (a)-(d)

### 4. Passive Non-Financial Entity

- if you tick this box, please include individual self-certification forms for each Controlling Person\**

\*Individual "Controlling Person tax residency self-certification forms" can be downloaded free of charge from the fund's Transfer Agent, J.P. Morgan SE, Luxembourg Branch under [www.jpmorgan.com/global/disclosures/tax-self-certification](http://www.jpmorgan.com/global/disclosures/tax-self-certification)

## 6. Payment Instructions

### Registered Bank Account Details

BANK ACCOUNT NAME <small>▶ If not same as account holder, see note above</small>		BANK ACCOUNT NUMBER/IBAN	
BANK NAME		BANK ADDRESS	
BANK CITY/POSTCODE		BANK COUNTRY	
SWIFT CODE		BIC OR SORT CODE	
SUB-ACCOUNT NAME , IF ANY		SUB-ACCOUNT NUMBER , IF ANY	

### Third Party Payments (if applicable).

Third party payments are generally discouraged. Third party payments are not permitted for private individuals. Full identification of the third party, including through the provision of the relevant documents, is required to accept third party payments. If the cash payment is coming from or paid to a bank account in a name different to the registered investor's name (i.e. a third party), and is held or used for the benefit of the investor, please provide (where applicable):

FULL THIRD PARTY ACCOUNT NAME		FULL THIRD PARTY LEGAL NAME	
THIRD PARTY LOCATION		BANK NAME	
BANK DOMICILE		BANK ACCOUNT NUMBER	

Please indicate the reason:

- Proceeds originating from a different fund/asset manager  Payment to a different fund/asset manager for the benefit of the investor
- Proceeds wired by our Custodian bank  Other (please provide explanation in the box)

The investor confirms being the ultimate beneficiary of the funds wired.

## Dividend Instructions

For any dividend shares in this account, dividend payments should be:

- Reinvested *Default if no choice indicated.*
- Paid to the bank account identified in section 6.

## 7. Electronic/Automated Deal Services

If the investor intends to use electronic/automated deal services, please make the appropriate selection below:

### Further (not Initial) Investment Instructions

- Format
- ISO 15022 / SWIFT FIN / MT
  - ISO 20022 / SWIFT NET / MX
  - 3rd Party Order Router (e.g. Calastone, EMX, Euroclear)
  - NSCC

Further Details

SWIFT BIC or DN

NSCC or CBL/EOC participant

### Valuation/Holding Statements

- Format
- MT535
  - semt.003.001.02

Further Details

SWIFT BIC or DN

NSCC or CBL/EOC participant

## 8. Investor Information

■ In connection with an account (or prospective account) we will obtain information about actual or prospective investors and associated persons of investors, such as beneficial owners, advisers, contact persons, and individuals who act on behalf of entities, such as employees, officers or directors (collectively, "Investor Information"). Investor Information can contain data concerning entities as well as personal data of individuals. The "Privacy, Use, and Disclosure of Investor Information" section of the prospectus has details about our practices regarding Investor Information and you acknowledge and accept such terms, as well as the terms stated here.

■ When Investor Information consists of personal data of an individual, please see the link to our Privacy Notice at the end of this section, 1 copies can be provided upon

request. The Privacy Notice provides individuals with information about the types of personal data that may be processed, to whom such personal data may relate, how it may be sourced, and the types of parties who may process or receive it, and for what purposes, and otherwise explains certain policies and practices that have been put in place to ensure the privacy of such personal data.

■ When Investor Information consists of personal data of an individual collected in order to meet legal and regulatory obligations for the prevention of money laundering and terrorist financing, it will be processed only for these purposes, unless otherwise permitted or agreed. The Privacy Notice also describes important rights of individuals relating to their personal data. By applying for and/or main-

taining an account, you agree to provide the Privacy Notice to individuals whose personal data you (or a representative) will provide to us or to agents associated with the fund, such as the depository or transfer agent.

■ Also see Section 9 below regarding Investor Data Disclosures.

■ The Privacy Notice can be found here: [www.troweprice.com/PrivacyNoticeEMEA](http://www.troweprice.com/PrivacyNoticeEMEA)

■ Participation in the SICAV and relations with the management company are governed by Luxembourg law. Any dispute that may arise in connection with the subscription of the shares is left to the exclusive jurisdiction of the Court of the city of Luxembourg, in the Grand Duchy of Luxembourg.

## 9. Investor Data Disclosures

■ By subscribing for shares and/or being invested in the Fund in respect of which J.P. Morgan SE, Luxembourg Branch ("J.P. Morgan Luxembourg") is a transfer agent (the "Fund"), the subscriber and/or investor ("Investor") mandates, authorises and instructs J.P. Morgan Luxembourg to hold, process and disclose the Investor Data (defined below) to the Authorised Entities (defined below), and to use communications and computing systems, as well as gateways operated by the Authorised Entities for the Permitted Purposes (as defined below), including where such Authorised Entities are present in a jurisdiction outside of Luxembourg where confidentiality laws might be of a lower standard than in Luxembourg. By subscribing for shares and/or being invested in the Fund, the Investor: (i) acknowledges that this mandate, authorisation and instruction is granted to permit

the holding, processing and disclosure of Investor Data by such Authorised Entities in the context of the Luxembourg statutory confidentiality obligations of J.P. Morgan Luxembourg, and (ii) waives such confidentiality in respect of the Investor Data for the Permitted Purposes.

■ By subscribing for shares and/or being invested in the Fund, the Investor: (i) acknowledges that authorities (including regulatory or governmental authorities) or courts in a jurisdiction (including jurisdictions where the Authorised Entities are established or hold or process Investor Data) may obtain access to Investor Data held or processed in such jurisdiction or access through automatic reporting, information exchange or otherwise in accordance with the applicable laws and regulations, and (ii) mandates, authorises and instructs J.P. Morgan Luxembourg and the Authorised Entities to disclose or make

available Investor Data to such authorities or courts, to the extent required by the applicable laws and regulations.

■ The purpose of the holding and processing of Investor Data by, and the disclosure to and within the Authorised Entities, is to enable the processing for the Permitted Purposes. By subscribing for shares and/or being invested in the Fund the Investor acknowledges and consents that such disclosure of Investor Data is in order for it to be held and/or processed by Authorised Entities inside or outside Luxembourg.

■ Subject to the foregoing J.P. Morgan Luxembourg shall inform the Authorised Entities which hold or process Investor Data (a) to do so only for the Permitted Purposes and in accordance with applicable laws, and (b) that access to such Investor Data within an Authorised Entity is limited to those per-



sons who need to know the Investor Data for the Permitted Purposes.

■ Any change in the operating model of J.P. Morgan Luxembourg where holding or processing of Investor Data is required as described above, and especially as regards the Authorised Entities and the Permitted Purposes, will be communicated by J.P. Morgan Luxembourg to the Fund in good time before its implementation, using the communication channels agreed upon between the Fund and J.P. Morgan Luxembourg. The Fund commits to J.P. Morgan Luxembourg to further communicate this information to the Investor forthwith upon receipt of such information.

For this application, the following definitions shall apply:

**“Authorised Entities”** means any of: (a) J.P. Morgan Chase Bank, N.A., an entity established in the United States of America, J.P. Morgan Bank (Ireland) plc, an entity established in the Republic of Ireland, J.P.

Morgan Europe Limited, an entity established in the United Kingdom, J.P. Morgan Services India Private Limited, an entity established in the Republic of India, and/or any other entity within the JP Morgan Chase group of companies worldwide, the ultimate holding company of which is JP Morgan Chase Bank N.A. (“JP Morgan Group”) that may be contracted from time to time by J.P. Morgan Luxembourg to facilitate its provision of services to the Fund; (b) the Fund, the management company, the investment manager(s) of the Fund (the “Manager”) and their respective agents, delegates and/or service providers contracted from time to time to facilitate the provision of services to the Fund; (c) a firm in Luxembourg that is engaged in the business of providing client communication services to professionals of the financial sector; or (d) a third party in the United Kingdom engaged in the provision of transfer agency software and technology solutions;

**“Investor Data”** means investor identifying confidential information received by J.P. Morgan Luxembourg in its capacity as ser-



vice provider for the Fund, whether received from the Investor, the Manager, the Fund, or a third party on behalf of any of them; and **“Permitted Purposes”** means any of the following purposes: (a) the opening of accounts, including the processing and maintenance of anti-money laundering/counterterrorism financing/know-your-client records; (b) the processing of subscriptions, payments, redemptions and switches in holdings made by or for the Investor; (c) maintaining the account records of the Investor and providing and maintaining the register of the Fund; (d) any ancillary or related functions or activities necessary for the performance of the Permitted Purposes and/or to J.P. Morgan Luxembourg’s provision of custody, fund administration, paying agency, transfer agency and other related services to the Fund, and (e) global risk management within the J.P. Morgan Group and the Manager’s group (as appropriate), including by retaining Investor Data as reasonably required to keep a proof of a transaction or related communications.

## 10. Account Owner Signature(s) and Date

**By signing below, you make this contract legally binding, and you also state, acknowledge and agree as follows:**

- you have received and read the most recent prospectus of the SICAV, each applicable Key Information Document (KID) or any other locally required document(s) and you understand and accept the terms and conditions of this investment as described in those documents and in this form (including the costs, risks and requirements);
- before making any subsequent investment(s), you agree to obtain and read the latest versions of the above documents (available via [www.funds.troweprice.com](http://www.funds.troweprice.com), the administrator or your intermediary);
- if you are investing in an institutional share class, you qualify as an institutional investor as described in the prospectus, and we may refuse or liquidate your investment if we determine you do not qualify;
- your account will not be opened unless and until we receive all materials we consider necessary and are satisfied that they are complete, correct, and authentic;
- we may ask you to provide additional tax information at any time, and you agree, any provision of law to the contrary notwithstanding, that we may subject your investment to US withholding taxes or to transfer, redemption or termination if you fail to provide adequate information;
- we may provide your identity and account information to tax authorities as required by law;
- these investments are not and will not be registered for sale in the United States;
- with respect to all laws and regulations, and all relevant terms stated in the prospectus, you are not a U.S. Person, nor will this account be held for the benefit of, or on behalf of, such a person;
- all requests for transactions in sub-fund shares will be processed based on when the request is accepted for processing, as described in the prospectus, and not according to any other information or event;
- commissions may only be paid in accordance with local regulation, and that any initial commission fee on a retail class is paid to the distributor, sales agent;
- all of the information in this form is truthful, correct and complete, that you have the authority to sign this application, and that you are at least 18 years old;
- you are aware that any false representation in these matters could lead to penalties or other adverse actions against you;
- you will notify us immediately of any changes in the information provided in this application, including all attachments;
- you, the undersigned, confirm that the above information accurately reflects all details relating to the beneficial owners of the subscribing entity. Should this information change you confirm that you will notify T. Rowe Price International Limited.

### Applicant(s)


NAME		NAME	
TITLE		TITLE	
DATE	PLACE	DATE	PLACE
SIGNATURE 		SIGNATURE 	

**Intermediary** *Sign above and here.*

**By signing below, you make this contract legally binding, and you also state, acknowledge and agree as follows:**

- I/We will abide by all terms in the prospectus of the SICAV, and will avoid taking any actions that would cause the SICAV to need to register in another jurisdiction except as specifically approved by the Board of Directors of the SICAV.
- I/We, as permitted by law, will procure our customers’ consent to share, upon request, any information with the SICAV or their Administration Agent to ensure their compliance with applicable AML regulations.
- I/We will make such information available to the SICAV and their agents or any regulatory authority promptly upon request.
- I/We undertake that in the event I/we become aware of a suspicious transaction or a breach of the requirements as described above, I/we shall promptly report such event to the relevant regulatory authorities and the SICAV. To the extent permitted by law, I/we also undertake to provide the SICAV with any information relating to any such transaction.
- I/We undertake that we will not accept investments in the SICAV from customers who provide incomplete evidentiary documentation.
- I/We agree to indemnify the SICAV for any loss that may incur as a result of failure to comply with the above.

- I/We possess all applicable licences, authorisations and operational capabilities to function as a distributor of shares of these funds in compliance with applicable law.
- I/We have provided the third party(ies) with all required materials, including the current prospectus and KID(s) of the relevant share class or any other locally required document(s), and will provide updated materials to the third party in advance each time that party makes any subsequent investment.
- I/We have not relied on another third party(ies) introduction
- We, the undersigned, confirm that the above information accurately reflects all details relating to the beneficial owners of the subscribing entity. Should this information change we confirm that we will notify T. Rowe Price International Limited.

MONEY LAUNDERING ACT/REGULATION
NAME OF PERSON AUTHORISED TO SIGN FOR INTERMEDIARY
TITLE
COMPANY NAME
COMPANY ADDRESS
SIGNATURE 

## Submitting Your Application

### Review the completed form and verify document suitability

For this application and all attachments, you must submit originals or certified copies, in English, German or French. All translations or copies must be certified as being a true translation or copy by an embassy, consulate, solicitor, licensed lawyer or a notary (empowered public authority), or by a bank regulated in a jurisdiction that has implemented AML/CTF regulations that are equivalent, under Luxembourg law, to Luxembourg standards. The certification must show the official stamp of the authority, the date, and the name, signature, contact details and, if possible, position of the representative. Our requirements may differ depending on the status and location of the corporate entity.

Make sure these documents are included with your application. If we need additional or updated documents, we will contact you.

#### All applicants

- registration form
- a completed IRS W8 BEN E form or W9 if applicable
- if you want to make your initial subscription now, complete a transaction form available from the management company or the administration agent or on [www.funds.troweprice.com](http://www.funds.troweprice.com)

#### Private investor(s)

- certified copy of passport(s) or identity card(s)

#### Applicants that are a regulated and/or listed entity, or are covered by a comfort letter from a regulated parent company, in an equivalent country

- original or certified true copy of comfort letter;
- last coordinated or up-to-date articles of incorporation (or an equivalent incorporation document);
- recent and up-to-date extract from the commercial register (or equivalent);
- the entity's official national identification number;
- list of authorized signatures for the account, on company letterhead and dated within the past 12 months;
- evidence of authorisation to enter into the relationship;
- name of the directors or persons exercising similar positions (for the legal arrangements) and involved in the business relationship with the fund;
- authorisation to enter into a relationship;
- recent proof of regulation by a national supervisory authority or of listing on a recognized stock exchange.

**Fax or Email completed application and attachments, then follow up by mailing originals. Any questions may be submitted via the email address or phone numbers below.**

#### Fax to

+352 227 443

#### Mail to

Select Investment Series III SICAV  
c/o J.P. Morgan SE, Luxembourg Branch  
European Bank & Business Centre  
6c, route de Trèves  
L-2633 Senningerberg  
Luxembourg

#### Phone number

+352 4626 85162

#### Email to:

[ta.is.registration@jpmorgan.com](mailto:ta.is.registration@jpmorgan.com)

**Investors in China (PRC), Singapore, Taiwan, Thailand, Vietnam, South Korea and Hong Kong can also use the following:**

#### Fax to

+852 3018 7884

#### Mail to

Select Investment Series III SICAV  
c/o JP Morgan Chase Bank,  
FAO: Hong Kong Transfer Agency  
18th Floor, Tower One, The Quayside,  
77 Hoi Bun Road,  
Kwun Tong, KLN,  
Hong Kong

#### Phone number

+852 2800 1523

#### Email to:

[ta.is.registration@jpmorgan.com](mailto:ta.is.registration@jpmorgan.com)

#### Applicants that are a non-regulated and non-listed entity

- last coordinated or up-to-date articles of incorporation (or an equivalent incorporation document);
- recent and up-to-date extract from the commercial register (or equivalent);
- the entity's official national identification number;
- list of authorized signatures on the account, on company letterhead and dated within the past 12 months;
- evidence of authorisation to enter into the relationship;
- names and ID of company representatives;
- name of the directors or persons exercising similar positions (for the legal arrangements) and involved in the business relationship with the fund;
- latest annual audited report or financial statement;
- list of shareholders including % held;
- ID document for natural persons identified as ultimate beneficial owners.

#### Applicants investing on behalf of a third party

- "Know Your Customer" documentation for the third party
- evidence of regulated status and confirmation of compliance with identification requirements to those set by Luxembourg legislation
- certificate declaring that you are permitted to act as an intermediary e.g., a copy of a Power of Attorney granted to you by the investor(s)

#### Passive NFEs

- for each controlling person that is a US citizen or tax resident, the name, address, date and place of birth, tax residence countries and IDs, and percentage of beneficial ownership in the account holder

#### Other

- special instructions for authorization authority for making changes to bank information or account registration

## Transfer Agency Portal Access

J.P. Morgan Bank SE, our Transfer Agency partner offers a secure online portal which gives you access to your account information and enables direct placement of deals into T. Rowe Price Funds in accordance with your own authorization protocols. Within the portal, you can view real-time valuations on your holdings, access price and transaction information, distribution details, check the status of pending deals and download documentation such as contract notes and statements.

If you would like to utilize the Transfer Agency Portal please complete the below by specifying the names and contact details of those individuals who have full authority to access the Portal.

If you have any queries relating to the Portal access, please email [ta.portal@jpmorgan.com](mailto:ta.portal@jpmorgan.com).

I/We would like to request access to the Transfer Agency Portal:

NAME
MOBILE PHONE NUMBER
EMAIL*

NAME
MOBILE PHONE NUMBER
EMAIL*

NAME
MOBILE PHONE NUMBER
EMAIL*

NAME
MOBILE PHONE NUMBER
EMAIL*

NAME
MOBILE PHONE NUMBER
EMAIL*

I/We would like to add this new account number to my existing Transfer Agency Portal access, by using the same username:

NAME
MOBILE PHONE NUMBER
USERNAME
EMAIL*

If there isn't enough space to include all those who need access, please provide your name, mobile phone number, and email address on a separate document.

\* We can only accept email addresses for individuals, please do not provide group or distribution email addresses.