

SUBSCRIPTION FORM FOR INDIVIDUALS LYNX

PLEASE USE CAPITAL LETTERS!

*First name		*Date of birth/Personal ID No.	
*Last name			
*Address			
*Postal code	*City/town	*Country	
*Tel. daytime (incl. country and area codes)		Fax (incl. country and area codes)	*Country (domicile for tax purposes)
*City/town of birth		*Country of birth	
*Taxpayer Identification Number (TIN) (or the equivalent)			
Email address			
*Amount (minimum initial investment SEK 500,000 thereafter a minimum of SEK 100,000 per occasion)		*Bank	
*Account number/IBAN (for payment of redemptions)		*BIC	

*Required information

***Investment horizon**

<1 year 1–3 years >3 years

***The money that is supposed to be invested originates from**

salary pension savings inheritance gift
 property sales corporate sales
 other,

***Is the money that is supposed to be invested transferred from another country than Sweden?**

No Yes

***Is the investment made on your own behalf?**

Yes No (specify on whose behalf)

***Are you a tax resident in country other than Sweden?**

Yes No If yes, please specify country and TIN (Tax Identification Number) in the table above

***Are you a politically exposed person?**

Yes No

***Are you a family member or known close associate to a politically exposed person?**

Yes No

The subscription form must be received by SS&C Financial Services (Ireland) Limited ("SS&C") **not later than two business days** before the subscription date. The subscription date is the last business day in each month. After approval, the subscription form will be confirmed by email by SS&C. Payment shall be made to the fund's account with SEB, Skandinaviska Enskilda Banken AB (publ), to account number **SEB 5851-10 485 10**. **IBAN SE 22 5000 0000 0585 1104 8510**, **BIC ESSESESS** **no later than two business days** before the subscription date.

Please provide personal identification number and name with the deposit. A contract note will be provided after payment has been received and the unit value determined. The latter takes place after the end of the month.

Fees:

Subscription fee: 0 per cent.
 Management fee: 1 per cent per annum.
 Performance fee: 20 per cent above yield threshold (90-day Swedish treasury bill).

The complete fund terms and conditions are provided in a separate information memorandum.

How to subscribe units in the Lynx Fund

These instructions are a summary of the subscription rules provided in the fund's information memorandum.

1. Fill in this subscription form. Remember to enclose the requested documents on page 2 regarding measures against money laundering. Your application to subscribe must reach SS&C no later than two business days before the applicable subscription date. The fund's subscription date is the last business day in each calendar month.
2. Send the form to: email: LynxISTrading.IR@sscinc.com.
3. Pay the subscription amount to the fund's bank account IBAN SE 22 5000 0000 0585 1104 8510. BIC: ESSESESS. The payment amount must be received no later than two business days before the subscription date. Please provide personal identification number and name with the deposit.

Cont. on next page.

THE ACT ON MEASURES AGAINST MONEY LAUNDERING AND TERRORIST FINANCING

There are rules in Sweden to prevent the financial system from being used for money laundering and terrorist financing. The rules are derived from the EU third money laundering directive, which means that the same rules are applicable in other EU countries. The rules states, i.a., that financial institutions have to collect information in order to "know their clients".

Documentation requirements

The rules require the following documents to be handed over to the company in connection with subscriptions to and redemptions of fund units.

Application form and a certified copy of a valid identification document. (See below for instructions regarding certification.) For persons who are not registered in the Swedish national registry such a valid identification document shall be their passport, national identity card or ID issued by a Government body showing the photograph and signature. In addition, persons who are not registered in Sweden must also enclose certified copies of two utility bills, by which is meant electricity, telephone, or water bills, or the like.

Politically exposed persons

A politically exposed person is a person who holds or has held an important public position in a state or an international organisation. Individuals in important public positions are, among others, Heads of State, members of parliament, ministers, supreme court and supreme administrative court judges, national audit officers, members of the executive board of central banks, ambassadors, officers of high rank, directors or members of the board of state owned companies, or a member of senior management in an international organisation.

Certification

To certify means to witness and confirm/verify that an abstract or copy is an identical copy of the original. In order for a copied identity document to be regarded as correctly certified it shall be endorsed by one person (other than the person who wishes to subscribe to units in the fund) by writing his signature, his name in block capitals and his telephone number directly on the copy together with wording to the effect that the copy is an identical copy of the original. Example:

I herewith certify that this copy is an identical copy of the original document

 **FIRST NAME LAST NAME, TEL. +12 123 456 78**

NB! As a consequence of the rules against money laundering we will be compelled not to accept applications to subscribe to the Fund if the above mentioned documentation is not complete. Subscription payments already received will be repaid to the sender's account, subject to applicable law, or to the account entered on the subscription form by the subscriber. The funds will be repaid without compensation for interest.

ELECTRONIC DISTRIBUTION

I/we hereby confirm that I/we have read and understood the risks associated with electronic communications as described in the Information memorandum and agree to receive information about my/our holding(s) to the email address(es) below. I/we shall not hold the Fund, the Directors, the Administrator or any director, officer, employee or agent thereof, liable now or at any time for any damage, financial or otherwise, which I/we may suffer with respect to any electronic communication.

Email address

Data Privacy

For information on our processing of personal data, please refer to our Privacy Notice available on Lynx Asset Management's web site, www.lynxhedge.se. The Administrator's data privacy statement is available at <https://www.ssctech.com/about/privacy>.

Signature

I/We solemnly declare that the above information is correct and that I/we will without delay inform Lynx Asset Management AB (the "Company") and/or SS&C Financial Services (Ireland) Limited (the "Administrator") about any changes to the information given above including change of domicile, any changes in name, address and bank account number. I/We confirm that I/we have read, understood and accept the fund terms and conditions and the information about the Fund as presented in the simplified prospectus and the information memorandum. Furthermore, I/we assure that I/we by signing this subscription form and following the purchase of units in the Fund are not violating the laws or regulations in my/our home country. I/We acknowledge that the Administrator in its absolute discretion reserves the right to request from me/us any such other or additional documentation where it deems it appropriate to do so to enable the Administrator to determine my/our compliance with applicable regulatory requirements. I/We confirm that the Company and/ or the Administrator may use this information if the authorities so require. I am/We are aware that the Company does not provide financial advice of the kind that is referred to in the Act (2003:862) concerning Financial Advice to Customers or such investment advice referred to in the Act (2013:561) on managers of alternative investment funds. I/We further confirm that I/we have not engaged the Company to provide such information. I/We understand and agree that any redemption proceeds paid to me/us will only be paid to the account of record and to a bank account in my/our name and with a recognized financial institution and acknowledge that the Company and/or the Administrator reserve the right to refuse to make any redemption payment if such payment might result in a breach or violation of any applicable anti-money laundering or other laws or regulations.

Note!

A certified copy of good quality of a valid identification document must be enclosed.

.....
City/town, date

.....
Signature, subscriber

.....
Clarification of signature