

TOP-UP APPLICATION FORM

Please use this form if you are an existing investor in the Atlantis International Umbrella Fund (the "Fund") and wish to top-up your investment. If you wish to invest in the Fund for the first time, the appropriate form may be obtained at www.atlantis-investment.com or by contacting Atlantis.

This form duly completed should be faxed to +353 1 542 2869.

If you have any queries, please contact the Investor Services Department at Northern Trust International Fund Administration Services (Ireland) Limited, telephone +353 1 434 5008.

PART I – EXISTING INVESTOR ACCOUNT DETAILS

- a) Please provide your Northern Trust unitholder number for your existing investment (if known). This must be the number for the account that you wish to top up:

- b) Please provide the registered name under which your units are held:

- c) Please provide your contact details in the event of any queries:

Name	
Address	
Telephone Number	
Email Address	

- d) If you have joint holders linked to this account, please mark an X in this box

PART II – TOP-UP INSTRUCTIONS

Please complete your fund choice(s) and investment amount(s) below:

Sub-Fund	Number of Units	Monetary Amount	Amount in Words
Atlantis Japan Opportunities Fund USD			
Atlantis Japan Opportunities Fund GBP			
Atlantis Japan Opportunities Fund EUR			
Atlantis Asian Fund USD*			
Atlantis Asian Fund GBP*			

Sub-Fund	Number of Units	Monetary Amount	Amount in Words
Atlantis Asian Fund EUR*			
Atlantis Asian Fund USD Class D			
Atlantis China Fund			
Atlantis China Healthcare Fund			
<p>*(From 20 November, 2012, units in the Atlantis Asian Fund USD, GBP and EUR classes will only be available to subscriptions from existing Unitholders in those classes unless the Directors, at their discretion, decide otherwise.)</p>			

PART III - REPRESENTATIONS AND WARRANTIES

1. I/We hereby agree that the representations, warranties and other information contained in the application form in which I/we made my/our initial investment in the Fund, to the extent not inconsistent with this top-up application form, remain accurate and are hereby repeated as at the date of this top-up application form.
2. I/We hereby represent that I/we have regular access to the internet. I/We acknowledge that I/we have the choice of receiving the prospectus and the Key Investor Information Document (KIID) on paper and in electronic form by means of a website and hereby specifically consent to receiving the KIID in electronic form by way of accessing the latest version of the document online at www.atlantis-investment.com (or such other website address as may be notified to me/us from time to time). Alternatively, I/we may request a paper copy to be delivered free of charge. I/We acknowledge that the KIID will be available at "Literature" Section of the respective Sub-funds at <https://www.atlantis-investment.com/products/overview> and I/we hereby confirm that I/we have also been notified electronically of this website address and the place where on the website the KIID can be accessed.
3. I/We hereby acknowledge that I/we have received or accessed by electronic means and/or by paper the KIID prior to my/our investment in the relevant shares in any share class and/or sub-fund. I/We also confirm that I/we will access the KIID by electronic means and/or by paper before making any subsequent and/or future subscriptions for Shares/Units in any share class and/or sub-fund.
4. I/We acknowledge that the Fund intends to take such steps as may be required to satisfy any obligations imposed by either (i) the Foreign Account Tax Compliance Act ("FATCA") regulations or (ii) any provisions imposed under Irish law arising from the inter-governmental agreement between the Government of the United States of America and the Government of Ireland ("IGA") so as to ensure compliance or deemed compliance (as the case may be) with the FATCA regulations or the IGA from 1 July 2014. I/We agree to provide to the Administrator the necessary FATCA declarations, confirmations and/or classifications at such times as each of them may request and furthermore provide any supporting certificates or documents as each of them may reasonably require in connection with this investment by reason of the FATCA regulations or the IGA, as described above, or otherwise. Should any information furnished to any of them become inaccurate or incomplete in any way, I/we hereby agree to notify the Administrator immediately of any such change and further agree to immediately take such action as the Administrator may direct, including where appropriate, redemption of our Units in respect of which such confirmations have become incomplete or inaccurate where requested to do so by the Fund, Manager, Investment Manager or the Administrator (as applicable). If relevant, I/we agree to notify the Administrator of any change to my/our tax residency status. I/we hereby also agree to indemnify and keep indemnified the Fund, Manager, Investment Manager and/or Administrator against any loss, liability, cost or expense (including without limitation

legal fees, taxes and penalties) which may result directly or indirectly as a result of a failure to meet our obligations pursuant to this section or failure to provide such information which has been requested by the Administrator and has not been provided by me/us, and from any misrepresentation or breach of any warranty, condition, covenant or agreement set forth herein or in any document delivered by me/us to the Administrator. I/We further acknowledge that a failure to comply with the foregoing obligations or failure to provide the necessary information required may result in the compulsory redemption of our entire holding in the Fund, and that the Manager and/or Custodian are authorized to hold back from redemption proceeds or other distributions to me/us such amount as is sufficient after the deduction of any redemption charges to discharge any such liability and I/we shall indemnify and keep indemnified the Fund, Manager and/or Custodian against any loss suffered by them or other Unitholders in the Fund in connection with any obligation or liability to so deduct, withhold or account.

PART IV – FATCA AND CRS

General Instructions for completion

We are obliged under Section 891E, Section 891F and Section 891G of the Taxes Consolidation Act 1997 (as amended) and regulations made pursuant to those sections to collect certain information about each investor's tax arrangements. If you have not completed these forms before in respect of your initial investment in the Fund, please complete the sections below as directed and provide any additional information that is requested. Please note that in certain circumstances we may be legally obliged to share this information, and other financial information with respect to an investor's interests in the Fund, with relevant tax authorities. This form is intended to request information only where such request is not prohibited by Irish law.

Unless otherwise stated, all terms identified in italics are as defined in the Agreement between the Government of Ireland and the Government of the United States of America to Improve International Tax Compliance and to Implement FATCA (the "Agreement"), a copy of which is available on the Irish Revenue website at <http://www.revenue.ie> or, as the context determines, the OECD Common Reporting Standard ("CRS") for Automatic Exchange of Financial Account Information, an initiative to implement automatic exchange of financial account information on a global basis.

For further information on FATCA or CRS, please refer to Irish Revenue website at <http://www.revenue.ie/en/business/aeoi/index.html> or the following link to the OECD CRS Information Portal at <http://www.oecd.org/tax/automatic-exchange/> in the case of CRS only.

If any of the information below about tax residence or FATCA/CRS classification changes in the future, please ensure you advise us of these changes promptly.

If you have any questions about this form or defining your tax residency status, please refer to the OECD CRS Portal or speak to a tax advisor.

Investors that are individuals should complete the Individual Self-Certification form overleaf. Please note that where there are joint individual account holders each investor is required to complete a separate Self-Certification form.

Investors that are entities should complete the Entity Self Certification form, which follows the Individual Self Certification form.

Individual Self-Certification for FATCA and CRS

Sections 1, 2, 3 and 5 must be completed by all individual investors.

*Section 4 should only be completed by any individual who is a Controlling Person** of an entity investor which is a Passive No-Financial Entity. For further guidance, see: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/>*

*Mandatory fields are marked with an **

Section 1: Investor Identification

Investor Name*: _____

Current Residential Address*:

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal Code: _____ Country: _____

Place of Birth*:

Town or City of Birth*: _____ Country of Birth*: _____

Date of Birth*: _____

Section 2: FATCA Declaration of U.S. Citizenship or U.S. Residence for Tax purposes*:

Please tick either (a) **or** (b) and complete as appropriate.

- (a) I confirm that [**I am**]/[the investor is] a U.S. citizen and/or resident in the U.S. for tax purposes and [my]/[its] U.S. federal taxpayer identifying number

(U.S. TIN) is as follows: _____.

OR

- (b) I confirm that [**I am not**]/[the investor is not] a U.S. citizen or resident in the U.S. for tax purposes.

Section 3: CRS Declaration of Tax Residency (please note that you may choose more than one country)*

Please indicate your/the investor's country of tax residence for CRS purposes (if resident in more than one country, please detail all countries of tax residence and associated tax identification numbers ("TIN")). Please see the CRS Portal for more information on Tax Residency.

NOTE: Provision of a TIN is required unless you are tax resident in a Jurisdiction that does not issue a TIN.

Country of Tax Residency	Tax ID Number

Section 4: Type of Controlling Person**

(ONLY to be completed by any individual who is a Controlling Person** of an entity investor which is a Passive Non-Financial Entity or an Investment Entity located in a Non-Participating Jurisdiction and managed by another Financial Institution)

For joint of multiple Controlling Persons**, please complete a separate Self-Certification form for each Controlling Person**.

Confirm what type of Controlling Person applicable under CRS that applies to you/the investor by ticking the appropriate box.	Please Tick	Entity Name
Controlling Person of a legal person – control by ownership		
Controlling Person of a legal person – control by other means		
Controlling Person of a legal person – senior managing official		
Controlling Person of a trust – settlor		
Controlling Person of a trust - trustee		
Controlling Person of a trust – protector		
Controlling Person of a trust – beneficiary		
Controlling Person of a trust – other		
Controlling Person of a legal arrangement (non trust) – settlor-equivalent		
Controlling Person of a legal arrangement (non trust) – trustee-equivalent		
Controlling Person of a legal arrangement (non trust) – protector-equivalent		
Controlling Person of a legal arrangement (non trust) – beneficiary-equivalent		
Controlling Person of a legal arrangement (non trust) – other-equivalent		

Section 5: Declaration and Undertakings

I declare that the information provided in this form is, to the best of my knowledge and belief, accurate and complete.

I acknowledge that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into agreements to exchange financial account information.

I undertake to advise the recipient promptly and provide an updated Self-Certification form where any change in circumstances occurs which causes any of the information contained in this form to be incorrect.

Authorised Signature: _____

Print Name*: _____

Date (dd/mm/yyyy)*: _____

Capacity*: _____

Entity Self-Certification for FATCA and CRS

Instructions for completion

Investors that are individuals should not complete this form and should complete the form entitled "Individual Self-Certification for FATCA and CRS".

Mandatory fields are marked with an *

Section 1: Investor Identification

Investor Name*: _____ (the "Entity")

Country of Incorporation or Organisation: _____

Registered Address*:

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal Code: _____ Country: _____

Mailing address (if different from above):

Number: _____ Street: _____

City, Town, State, Province or County: _____

Postal Code: _____ Country: _____

Section 2: FATCA Declaration Specified U.S. Person:

Please tick either (a), (b) or (c) below and complete as appropriate.

- (a) The Entity is a *Specified U.S. Person* and the Entity's U.S. Federal Taxpayer Identifying number (U.S. TIN) is as follows:

U.S. TIN: _____

- (b) The Entity is **not** a *Specified U.S. Person* (please also complete Sections 3, 4 and 5)
(c) The Entity is a US person but **not** a *Specified U.S. Person* (please also complete Sections 3, 4 and 5)

Section 3: Entity's FATCA Classification*

The information provided in this section is for FATCA. Please note your classification may differ from your CRS classification in Section 5:

3.1 Financial Institutions under FATCA

If the Entity is a *Financial Institution*, please tick one of the below categories, and provide the Entity's *GIIN* at 3.2.

I.	<i>Irish Financial Institution or a Partner Jurisdiction Financial Institution</i>	
II.	<i>Registered Deemed Compliant Foreign Financial Institution</i>	

III.	<i>Participating Foreign Financial Institution</i>	
------	--	--

3.2 Please provide the Entity's *Global Intermediary Identification number* (GIIN)

3.3 If the Entity is a *Financial Institution* but unable to provide a GIIN, please tick one of the below reasons:

I.	<i>Partner Jurisdiction Financial Institution</i> and has not yet obtained a <i>GIIN</i>	
II.	The Entity has not yet obtained a <i>GIIN</i> but is sponsored by another entity which does have a <i>GIIN</i> Please provide the sponsor's name and sponsor's GIIN : Sponsor's Name: _____ Sponsor's GIIN: _____	
III.	<i>Exempt Beneficial Owner</i>	
IV.	<i>Certified Deemed Compliant Foreign Financial Institution</i> (including a <i>deemed compliant Financial Institution</i> under Annex II of the <i>Agreement</i>)	
V.	<i>Non-Participating Foreign Financial Institution</i>	
VI.	<i>Excepted Foreign Financial Institution</i>	

3.4 Non-Financial Institutions under FATCA

If the Entity is not a *Financial Institution*, please tick one of the below categories:

I.	<i>Active Non-Financial Foreign Entity</i>	
II.	<i>Passive Non-Financial Foreign Entity</i> (If this box is ticked, please include self-certification forms for each of your <i>Controlling Persons</i>)	
III.	<i>Excepted Non-Financial Foreign Entity</i>	

Section 4: CRS Declaration of Tax Residency (please note that you may choose more than one country)*

Please indicate the Entity's place of tax residence for CRS purposes (if resident in more than one country, please detail all countries of tax residence and associated tax identification numbers).

NOTE: Provision of a TIN is required unless you are tax resident in a Jurisdiction that does not issue a TIN.

If the Entity is not tax resident in any jurisdiction (e.g. because it is fiscally transparent), please indicate that below and provide its place of effective management or country in which its principal office is located.

Country of Tax Residency	Tax ID Number

Section 5: Entity's CRS Classification*

The information provided in this Section is for CRS. Please note that an Entity's CRS classification may differ from its FATCA classification in Section 3. For more information, please see the CRS Standard and associated

commentary: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/>

5.1 Financial Institutions under CRS:

If the Entity is a *Financial Institution*, please tick one of the below categories:

I.	<i>Financial Institution under CRS</i> (other than (II) below)	
II.	An <i>Investment Entity</i> located in a <i>Non-Participating Jurisdiction</i> and managed by another <i>Financial Institution</i> (If this box is ticked, please indicate the name of any <i>Controlling Person(s)</i> of the Entity and complete a separate individual self-certification form for each of your <i>Controlling Persons</i> **)	

5.2 Non Financial Institution under CRS:

If the entity is a *Non Financial Institution*, please tick one of the below categories

I.	<i>Active Non-Financial Entity</i> – a corporation the stock of which is regularly traded on an established securities market or a corporation which is a related entity of such a corporation	
II.	<i>Active Non-Financial Entity</i> – a Government Entity or Central Bank	
III.	<i>Active Non-Financial Entity</i> – an International Organisation	
IV.	<i>Active Non-Financial Entity</i> – other than (I) -(III) (for example a start-up NFE or a non-profit NFE)	
V.	<i>Passive Non-Financial Entity</i> (If this box is ticked, please complete a separate Individual Self-Certification Form for each of your <i>Controlling Person(s)</i> **)	

Controlling Persons:

NB: Please note that each Controlling Person must complete a Separate Individual Self-Certification form. If there are no natural person(s) who exercise control of the Entity, then the Controlling Person will be the natural person(s) who hold the position of senior managing official of the Entity.

For further information on identification requirements under CRS for Controlling Persons, please see the Commentary to Section VIII of the CRS Standard: <http://www.oecd.org/tax/automatic-exchange/common-reporting-standard/common-reporting-standard-and-related-commentaries/>

Section 6: Declarations and Undertakings

I/We declare (as an authorised signatory of the Entity) that the information provided in this form is, to the best of my/our knowledge and belief, accurate and complete.

I acknowledge that the information contained in this form and information regarding the Account Holder may be reported to the tax authorities of the country in which this account(s) is/are maintained and exchanged with tax authorities of another country or other countries in which the Account Holder may be tax resident where those countries (or tax authorities in those countries) have entered into agreements to exchange financial account information.

I/We undertake to advise the recipient promptly and provide an updated Self-Certification where any change in circumstance occurs which causes any of the information contained in this form to be incorrect.

Authorised Signature(s)*:

Print Name(s)*:

Capacity in which declaration is made*:

Date (dd/mm/yyyy)*: _____

PART V - DECLARATIONS AND SIGNATURE

I/We understand that the information I/we provide on this application form will be used for the purposes of administration, analysis, research and disclosure to the Manager, the Trustee and their respective delegates and agents.

I/We declare that:

- I/we understand and agree to make the representations and warranties contained in Part IV of this application form.
- I/we have read the latest Key Investor Information Document(s) applicable to my/our investment.
- The information given by me/us is correct to the best of my/our knowledge and I/we will inform Atlantis immediately of any changes to the information contained therein.

SIGNATURE(S) OF ALL APPLICANTS AND DATE (YOU MUST SIGN HERE – Please ensure all relevant sections are completed).

You must provide a SIGNATURE for EACH ACCOUNT HOLDER

PRIMARY ACCOUNT SIGNATURE: _____ DATE: _____

SECOND ACCOUNT SIGNATURE: _____ DATE: _____

THIRD ACCOUNT SIGNATURE: _____ DATE: _____

FOURTH ACCOUNT SIGNATURE: _____ DATE: _____