

**Additional Permitted Subscription (APS)
In Specie Transfer Form**

Fundsmith Equity Fund and Fundsmith Sustainable Equity Fund

Additional Permitted Subscription (APS) In Specie Transfer Form

This form is for individuals wanting to transfer their deceased Spouse's Fundsmith ISA directly into their APS ISA. In order to do this, we need to have calculated your APS Allowance and opened an APS ISA account for you, so please ensure you have also completed an APS ISA Application Form before completing this form.

- Please read the General Guidance on Additional Permitted Subscriptions (APS) ISA allowance before completing this form, as it may help you better understand the correct process to follow. Alternatively, please call us on 0330 123 1815 to discuss.
- Please complete this form in ink using **BLOCK CAPITALS**.
- Return the form to Fundsmith LLP, PO Box 10846, Chelmsford, CM99 2BW.
- The Key Investor Information Documents and the Supplementary Information Document including the Fundsmith ISA Terms and Conditions contain important information about the Fundsmith Equity Fund, Fundsmith Sustainable Equity Fund and the Fundsmith ISA and all investors should read these before making a decision to invest. These documents can be downloaded from our website, www.fundsmith.co.uk.
- If you are unsure about the suitability of these funds for you, please consult your financial adviser.

Name of APS applicant	
Title	Surname
Forename(s)	D.O.B. <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Fundsmith account number	

Contact details	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	
Postcode	Email
Telephone	Mobile

Details of the Deceased	
Title	Forename(s)
Surname	
Date of birth	Date of death
<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> / <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Permanent residential address of the Deceased at their date of death	
<input type="text"/>	
<input type="text"/>	
<input type="text"/>	Postcode
Existing Fundsmith account number	
<input type="text"/>	

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Applicant's Declaration

I declare that:

- I am the surviving Spouse/Civil Partner of the Deceased named on this form.
- I was living with the Deceased within the meaning of section 1011 of the Income Tax Act 2007 at the date of the Deceased's death (we were not separated under a court order, under a deed of separation or in circumstances where the marriage or civil partnership had broken down).
- The subscription is made under the provisions of regulation 5DDA of the ISA regulations (additional permitted subscriptions).
- This in specie transfer subscription is made within 180 days of beneficial ownership of the Deceased's ISA passing to me.
- I have a copy of the latest available Key Investor Information Documents and Supplementary Information Document and have kept them for my records. I consent to Fundsmith LLP providing the Key Investor Information Documents via Fundsmith's websites.
- I agree to be bound by the ISA Terms and Conditions, within the Supplementary Information Document and accept that these may be varied in accordance with their terms.
- The information given in this application form is correct to the best of my knowledge and belief.
- I am the beneficial owner of this investment.

Signature

Date

Executor/Administrator's Declaration

By signing this form, the Executors or Administrators of the Deceased's estate confirm that the applicant is the beneficiary of the Deceased's Fundsmith ISA and Fundsmith is authorised to re-register the Deceased's ISA Investments into the name of the APS Applicant.

Please note that for a Corporate Executor or Administrator we require two signatures along with a certified signature list.

Signature (Executor/Administrator)

Date

Name

Capacity

Signature (Executor/Administrator 2, if applicable)

Date

Name

Capacity

Signature (Executor/Administrator 3, if applicable)

Date

Name

Capacity

Signature (Executor/Administrator 4, if applicable)

Date

Name

Capacity