

Fundsmith Equity Fund and Fundsmith Stewardship Fund



This form is to be used for opening an APS ISA account with Fundsmith. Please read the General Guidance on Additional Permitted Subscriptions (APS) before completing this form.

#### Important Notes;

- If the Deceased's ISA is held with Fundsmith, please complete just the Application part of the this form. Please ensure you sign the Application.
- Please complete this form in black ink using BLOCK CAPITALS.
- If the Deceased's ISA(s) are held with other providers, please complete both the Application Form and the Transfer Authority section (a separate Transfer Authority is required for each ISA provider).
- Return the form to Fundsmith LLP, PO Box 10846, Chelmsford, CM99 2BW.
- The Key Investor Information Documents, Fund Prospectuses, Sustainability Disclosure Document, and Supplementary Information Document including the Fundsmith ISA Terms and Conditions contain important information about the Fundsmith Equity Fund, Fundsmith Stewardship Fund and the Fundsmith ISA. 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 if these funds are suitable for you and your financial objectives please consult a financial advisor.

If you have any questions regarding this form or would like to discuss any other matter, our team is available to assist you. You can reach us using any of the following:

- Webchat: Visit our website to connect with a member of our team
- Phone: 0330 123 1815 (or +44 1268 448659 if calling from overseas) or;
- Email: enquiries@fundsmith.co.uk

Name of APS a	nnlicant	
Title	Surname	
Forename(s)		D.O.B. D D / M M / Y Y Y Y
Existing Fundsmith	account number (if available)	
	ve held any political or public function, or if you are an political or public function please tick this box.	immediate relative, close friend or business associate of a person that holds
Contact details	;	
Permanent resider	ntial address	
Postcode	Email	
Telephone		Mobile
National Insura	ance Number	
Please provide your	National Insurance Number	
If you don't have a N	ational Insurance Number, please provide rationale*	
* To be eligible for a	n ISA, you must generally be a UK tax resident and will	be required to declare this at the end of this form.
	National Insurance Number to apply for an ISA unless y	ou are not eligible for one. You can check if you are eligible and apply online



Details of the Deceased	
Title Forename(s)	
Surname	
Date of birth DD/MM/YYY	Y Date of death DD/MM/YYYY
Date of marriage or civil partnership between the investor and the Dec	peased DD/MM/YYYY
Permanent residential address of the Deceased at their date of death	
	Postcode
National Insurance Number if known, if the deceased was not eligible National Insurance Number, please expressly confirm by stating N E.	for a
Existing Fundsmith account number (if known)	
If the deceased held an ISA with someone other than Fundsmith, p	olease fill out the Transfer Authority section at the end of this form.
Your bank details	
If we do not already hold bank details for you, please complete this sect	ion.
certified copies):	our nominated bank account (please note that we only accept originals or
<ul><li>A cancelled cheque for the bank account;</li><li>A paying in slip for the bank account;</li></ul>	
A statement for the bank account dated within the last three months	s;
A letter from the bank confirming ownership of the bank account.	
Name of bank	Branch
Account holder(s)	
Sort code	Account number
For international bank accounts, please provide the following information	n
BIC/SWIFT	IBAN
	ructions relating to the above account(s) either by post, fax, telephone or online nunciation' and 'Instrument of Transfer' of the shares to Fundsmith LLP for



#### **APS** eligibility declaration

#### I declare that:

- I am the surviving spouse/civil partner of the Deceased named on this application.
- 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).
- I wish to establish a Fundsmith APS ISA. The subscription is made under the provisions of regulation 5DDA of the ISA regulations (Additional Permitted Subscription).
- Any cash subscription will be made within 3 years of the date of death, or if later, 180 days of the completion of the administration of the estate and/ or any non-cash subscription will be made within 180 days of beneficial ownership of the Deceased's ISA passing to me.
- I have not made, and will not make any additional permitted subscription with any existing ISA provider of the Deceased, referred to in the attached
   Transfer Authority Section(s) nor have I transferred the APS allowance relating to the Deceased's ISA(s) to another ISA provider.
- I am 18 years of age or over.
- I am not a US Person, i.e. resident of the U.S. as defined in the Prospectus and I will notify Fundsmith immediately in the event that I/we become a U.S Person.
- All subscriptions made, and to be made, belong to me.
- I have a copy of the Key Investor Information Documents, Fund Prospectuses, Sustainability Disclosure Document, and Supplementary Information Document, and have kept them for my records. I consent to Fundsmith LLP providing the documents via Fundsmith's websites.
- I agree to be bound by the Fundsmith ISA Terms and Conditions as set out in the Supplementary Information Document, and I accept that these may be varied in accordance with their terms.
- The information given in this application is correct to the best of my knowledge and belief.
- I will notify Fundsmith immediately should any of the information provided, and in particular, any information regarding my tax residency.
- I acknowledge that the Fundsmith Stewardship Fund does not have a UK sustainable investment label as it does not have a sustainability goal.
   Sustainable investment labels help investors find products that have a special sustainability goal.

#### I authorise Fundsmith:

- To hold my cash subscription, ISA investments, interest, dividends and any other rights or proceeds in respect of these investments and any other cash.
- To make on my behalf any claims to relief from tax in respect of ISA investments.
- To accept redemption dealing instructions by post, telephone or online via the myAccount section of the Fundsmith website and for payment to be made
  to the bank account specified above.

#### **Data Protection**

- I acknowledge that Fundsmith will process any personal data that is provided or is otherwise obtained in connection with this form in accordance with Fundsmith's data protection policy, a copy of which is set out in the Supplementary Information Document.
- To the extent that Fundsmith receives any special category data in connection with the processing of this form (including, for example, identification documentation from which my racial or ethnic origin may be identified) I acknowledge that the lawful basis upon which this processing shall be carried out shall be as set out in the Supplementary Information Document (as updated and amended from time to time)..

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Please tick this box if you wish to receive marketing communications via emails and post from Fundsmiti	1.
Signature	Date



## **Transfer Authority Section**

This section should only be used if the Deceased held an ISA at the date of their death with a different ISA manager (i.e. not Fundsmith) and you want to include those holdings in the APS allowance available via Fundsmith. If the Deceased held multiple ISAs with different ISA managers, please complete one section per ISA manager so that we can contact them separately.

Name of Deceased	
Permanent residential address of the Deceased at their date of deat	th
	Postcode
Date of birth DD/MM/YYY	Y Date of death D D / M M / Y Y Y
National Insurance Number (if known)	
Name of Deceased's ISA manager	
Address of Deceased's ISA manager	
Deceased's ISA account number (if known)	
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