



## TRANSFER FORM LYNX

PLEASE USE CAPITAL LETTERS!

|                                                  |                 |                       |
|--------------------------------------------------|-----------------|-----------------------|
| Total holding (100%)<br><input type="checkbox"/> | Number of units | Date (month-end only) |
|--------------------------------------------------|-----------------|-----------------------|

### Transferor

|                                                    |                                   |
|----------------------------------------------------|-----------------------------------|
| *Last name, first name/Company name                | *Investor Account No. (Entity ID) |
| *Telephone, daytime (incl. country and area codes) |                                   |
| Email address                                      |                                   |

\*Required information

### For entities

- ☐ The transfer constitutes a change in beneficial ownership
- ☐ The transfer constitutes no change in beneficial ownership

### Purpose of the transfer

- ☐ Sale or transfer of units from one party to another
- ☐ No change of underlying client
- ☐ Change in name of registered unit-holder (due to marriage, company merger, change of company name)
- ☐ Transfer of units due to unit-holder's death or bankruptcy/merger
- ☐ Other, please specify: \_\_\_\_\_

### Documentation requirements

**Individuals:** a certified copy of a valid identification document. 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.

**Entities:** current certificate of incorporation/registration or equivalent and a certified copy of a valid identification document for all persons authorised to sign on behalf of the company. In the case of authorised signatories who are not Swedish citizens, the same requirements apply to identity documents as for non-Swedish individuals (see above).

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### Transferee

- ☐ Existing unit-holder in the Lynx Fund

|                                                    |                                   |
|----------------------------------------------------|-----------------------------------|
| *Last name, first name/Company name                | *Investor Account No. (Entity ID) |
| *Telephone, daytime (incl. country and area codes) |                                   |
| Email address                                      |                                   |

Same documentation requirements apply as for the transferor (see above).

- ☐ New unit-holder in the Lynx Fund. Please complete the fund's subscription form. The form is available on our website [www.lynxhedge.se](http://www.lynxhedge.se).

### How to transfer units in the Lynx Fund:

- Fill in this transfer form, please note that new unit-holders also need to complete the fund's subscription form. All documentation must reach SS&C Financial Services (Ireland) Limited **no later than three banking days before the trade date. The trade date is the first banking day of each calendar month.**
- Send the documentation to: email: [LynxISTrading.IR@sscinc.com](mailto:LynxISTrading.IR@sscinc.com).

## 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](http://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 transfer form and following the transfer of units in the Fund am/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/We accept and agree that the Company and/or the Administrator will use my/our personal data (as well as information provided by me/us and information that might be gathered from other sources) to the extent that is required for the fulfilment of this agreement and assignments related to this agreement, including providing them to third parties and transferring them internationally, all as more fully described in the Administrator's data privacy*

*statement, a copy of which is available at <https://www.ssctech.com/about/privacy>, and for completion of the Company's and/or the Administrator's legal and regulatory obligations, and that the personal information can be provided to and processed by the Administrator and/or the Company or any of its affiliated companies. Furthermore, I/we accept and agree that the Company and/or the Administrator can use my/our personal identification number(s) as a unit-holder ID. In addition, I/we accept and agree that the Company and/or the Administrator, or such company they have provided the personal information to pursuant to the above, can use my/our personal information for the purpose of providing me/us with information. 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.*

## Transferor

.....  
City/town, date

.....  
Signature (authorised signatory)

.....  
Clarification of signature

## Transferee

.....  
City/town, date

.....  
Signature (authorised signatory)

.....  
Clarification of signature