# AMENDMENT FORM



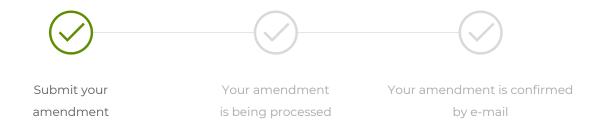
The investment institution SproutBridge Equity Fund is an initiative of SproutBridge B.V.

Attention! This investment falls outside AFM supervision. No license and no prospectus required for this activity.





#### AMENDMENT PROCEDURE



The information you provide in this form is required to process amendments to your subscription and will be shared with AssetCare, the Administrator of the Fund. AssetCare will handle the amendment(s) and will contact you in case additional information is required. Some of the requested information, such as the reason for changes, arises from legal obligations.



Words and expressions in this form starting with a capital letter have the meaning explained in Annex I of the Information Memorandum.

Do you have any questions while filling out the form? Please feel free to contact AssetCare at 020 244 27 15 or investors@assetcare.nl.

### INFORMATION ABOUT SPROUTBRIDGE EQUITY FUND

The documentation below provides important information about the characteristics of the Fund, such as the investment policy and the risks involved.

## SproutBridge Equity Fund

- → Information Memorandum (IM)
- → Key Information Document (KID)
- ---> Terms & Conditions (see Annex 1 of the IM)

It is recommended to carefully read and save the documents beforehand, so that you may consult them at any time.



Do you want to open a webpage from this form? Make sure this form is saved beforehand to avoid that the data that you have entered is lost.



# **INVESTOR DETAILS**

Please enter the requested information in the table below.

Name of Investor	
What amendment would you like us to process?	Modify details of Investor → see section below
	Additional subscription → see page 4
	Redemption (full or partial) → see page 5

# MODIFY DETAILS OF INVESTOR

Select only the information that you like to have amended and enter both the current and the new details.

	Current	New
Company name		
Address		
Email address		
Phone number		
Tax residency/residencies		
IBAN		
Account holder name		
Employment type		
Profession		
Authorized representative		
Director(s)		
(Pseudo) UBO('s)		
PEP status		
Other:		

Please provide an explanation to the amendment:



#### ADDITIONAL SUBSCRIPTION

Please indicate the additional subscription amount and from which bank account the deposit(s) will be made.

Subscription amount €				
IBAN				
Account holder name				
In the table below, please select the sources explaining the origin of the deposit, and include the percentage of each source. The total of the percentages should be 100%.				
Salary	%	Savings	%	
Income from entrepeneurial activities	%	Income from investments	%	
Property	%	Retirement benefits	%	
Inheritance/gift	%	Family wealth	%	
Other:			%	

The minimum amount for an additional subscription is  $\leq$  25,000. The Amendment Form should be received at least five (5) Business Days prior to the relevant Transaction Date.



Please include a copy of a recent bank statement showing the IBAN, account holder name and address if you have not previously made a transfer to the Fund from this account. The name associated with the bank account from which the subscription amount is transferred must match the name(s) of the Investor.

# DEPOSIT INSTRUCTIONS (IN CASE OF AN ADDITIONAL SUBSCRIPTION)

The subscription amount must be received before units can be issued. You will receive a confirmation by email when you the subscription amount can be transferred in case of an additional subscription.

In a later stage, you will receive the deposit instructions from the Fund Manager.



### REDEMPTION (COMPLETE OR PARTIAL)



The redemption request should be received at least five (5) Business Days prior to the relevant Transaction Date. The redemption of Units is enforced on the Redemption Date. The IM contains more information about, for example, the valuation and the payment of funds.

The Transaction Date is generally the first Business Day of the month. Once the redemption is processed, you will receive a Transaction Note with an overview of your Units.

Please indicate the redemption amount or number of Units you want to redeem.

Type of redemption	Full redemption	Partial redemption <sup>1</sup>
What is the amount of Units you wish to redeem?	Amount	Units
	€	Number <sup>2</sup>
IBAN		
Account holder name		
What is the many many makes and many their 2		

What is the reason you want to redeem Units?

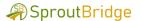


Please include a copy of a recent bank statement showing the IBAN, account holder name and address if you have not previously made a transfer to the Fund from this account. The name associated with the bank account from which the subscription amount is transferred must match the name(s) of the Investor.

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<sup>&</sup>lt;sup>1</sup> A partial redemption is only permitted if the Investor subsequently holds a minimum of € 25,000 in Units. It is determined based on the data on the last Valuation Date prior to the next Transaction Date whether this is the case.

<sup>&</sup>lt;sup>2</sup> Please specify in (4) decimals.



#### SIGNATURE PAGE

By signing the Amendment Form you declare that you:

- the information you provided in this Amendment form is, to the best of your knowledge, accurate;
- have read the IM, the KID and the Terms & Conditions;
- understand and accept the information in the IM, the KID and the Terms & Conditions;
- understand and accept the risks associated with investing in the Fund, including any changes introduced by the amendments, which risks are inter alia further described in chapter 6 of the IM;
- agree that the Fund Manager will use and process the information you provide in accordance with the privacy statement which can be found at <u>privacy statement</u>, including the administration of the Fund and to comply with legal obligations;

This form and the required documents will be used to process your amendment and perform subsequent services. The amendment cannot be processed if the Amendment form is incomplete.

	First Investor	Second Investor <sup>3</sup>
Date		
City		
Name		
Signature <sup>4</sup>		



Please note that this form should be saved before opening a web page.

<sup>&</sup>lt;sup>3</sup> Only required for a joint subscription or for a business subscription with multiple authorized representatives.

<sup>&</sup>lt;sup>4</sup> Whether you can provide a digital signature depends on the program you use to open the file and your settings. Unable to provide a digital signature? In that case, print out the form, sign by hand, and scan or photograph the signed document.



#### SUBMIT YOUR AMENDMENT



AssetCare will contact you by phone or email if additional information or documentation is required.

Please send a signed form to investors@assetcare.nl (with info@sproutbridge.nl in CC) or by regular mail to AssetCare. You will be notified by email when your subscription is received and being processed and/or should we need additional information.



Please contact if you need any help completing the subscription form and/or have any questions about this form:



+31 (0) 20 244 27 15

Available each working day from 08:00 to 18:00



### investors@assetcare.nl

Our aim is to answer your email within 24 hours



### AssetCare

Mondriaantoren Amstelplein 40C 1096 BC Amsterdam

Fund Manager and Administrator will protect the privacy of the Investors in the Fund. All privacy-sensitive information that is provided is subject to the privacy statement. Fund Manager and Administrator make reasonable efforts to keep this information confidential and to use it only for the purposes described in the privacy statement. Fund Manager and Administrator work in accordance with the Dutch privacy legislation (AVG). In order to process a subscription, Fund Manager and Administrator need information such as name and email address. These details may also be used to keep you, as Investor in the Fund, informed of the developments in the Fund or to send you other information that may be of interest to you. This is optional and you are free to opt out (or opt in) to this service at any time.

Fund Manager or Administrator will not disclose Investors' information to third parties without permission, other than to the parties listed in the IM or unless otherwise required by law.

Fund Manager and Administrator reserve the right to modify the privacy statement in the event there are changes in its policy or business operations or in case law or case law warrant it.

Please feel free to contact the Administrator at investors@assetcare.nl in case you have any questions or comments about the privacy statement.