



| Subscriptio  | n fo   | rm  | – f                                     | or s   | subs  | crip                                | otic   | n c                              | of u                                | ıni     | ts in Monive   | ent  | AB                           |   |  |
|--|--|---|---|--|---|-------------------------------------|--|----------------------------------|-------------------------------------|---------|--|--|------------------------------|---|--|
|  | <b>Subscription period:</b> 6th – 20th of February 202<br><b>Subscription price:</b> SEK 21.75 |   |   |  |   |                                     |  |                                  |                                     |         |  | Subscription can also be made<br>electronically with BankID and<br>NemID on www.sedermera.se |                              |   |  |
| Allocation:  |  | Any all                                     | otme                                    | nt of  | units wil   | l be n                              | otifie   | d via a                          | a settlement note.                  |         |  |  |                              |   |  |
| Payment: To be made in accordance with instructions on the settlement no   |  |   |   |  |   |                                     | Please also note that the subscriber who has a custody account or account with |                                  |                                     |         |  |  |                              |   |  |
| In an assessment of Monivent AB future development and operations, it is<br>must make their own assessment of the impact of these risks by reading o   |  |   |   | ng and   | underst   | anding                              | all ava  | ilable i                         | nformation published concerr        | ning    | specific rules, such as an ISK/KF account, the<br>subscription must be made in agreement |  |                              |   |  |
| is not to be made in conju   |  |   |   |  |   |                                     |  |                                  |                                     |         | n, or www.monivent.se. Payme<br>ment note.   | nt   | with th                      | ne bank/trustee for the account.  |  |
| a subscription price of  | of SEK :<br>rrant o  | 21.75 p<br>of serie                         | er un                                   | nit. Ea  | ch unit c   | onsis                               | ts of t  | hree                             | (3) sh                              | ares    | units in Monivent AB<br>at a price of 7.25 SEK<br>wed subscription is o                  | per  | Number of unit               | ts  |  |
| 2. Fill in where the al only one alternative)  |  | and pa                                      | aid fo                                  | r unit   | s are to  | be del                              | livere   | d, ow                            | ner-r                               | egist   | ered securities accou  | nt (Sw   | vedish: VP-acc               | count) or custody account (state  |  |
| Owner-registered securities ac   | count/ Se  | rvice acco                                  | ount                                    |  |   |                                     |  |                                  |                                     |         | Bank   |  |                              |   |  |
|  | 0   0  | 0   0                                       |   |  |   |                                     |  |                                  |                                     |         |  |  |                              |   |  |
| Custody account  |  |   |   |  |   |                                     |  |                                  |                                     |         | Bank/Nominee   |  |                              |   |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         |  |  |                              |   |  |
| Do you have an accor   | unt at   | Nordn                                       | et or                                   | Avan:  | za? Pleas   | e cor                               | ntact  | vour i                           | resne                               | ctive   | hank to make your s  | uhscr  | intion directl               | y via Nordnet or Avanza.  |  |
| - Joyeu nave an accor  |  | TOT GIT                                     |   | 7100112  | -u. i icus  | ,                                   |  | you                              | СЭРС                                |         | . Dank to make your 5  | <b>u</b> 250.  | .peron un con                | y via reorance or xvanza.   |  |
| 3. Have you, through Sede  | ermera, i  | nvested                                     | ten (10                                 | 0) times   | during the  | e last tv                           | velve (1   | 2) mon                           | ths, or                             | inves   | ted through Sedermera six (  | (6) time   | s each year for th           | ne last five (5) years?   |  |
| Notice, the documents  | er 15 0<br>form be<br>ur ID (Pa<br>shall be  | 00 EUR<br>e fulfille<br>assport<br>e sent t | RO, or<br>ed which<br>t) must<br>to Sed | ich can<br>it be se<br>lermer  | be found<br>ent to Sec<br>a Fondko  | d on th<br>Iermei<br>mmiss          | ne follo<br>ra Fon<br>sion <b>vi</b>   | owing l<br>dkomi<br><b>a pos</b> | link: w<br>missic<br><b>t</b> , see | ww.s    | edermera.se.<br>post to the below stated   | d addr   | ess, during the              | subscription period.  |  |
| 5. Fill in your name a  Last name/Company  | na aac   | ress ir                                     | itorm                                   | lation   | (PLEASE   | Nam                                 |  | AKLY                             | ,                                   |         |  | Nation   | al ID number/Corp.I          | D.no.   |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         |  |  | ·                            |   |  |
| Street address (or PO Box or equivalent)   |  |   |   |  | Dayt  | Daytime telephone/mobile phone NID. |  |                                  |                                     |         | NID/LE   | (LE)*  |                              |   |  |
| Postal code  | Postal code City   |   |   |  | Cour  | Country (if other than Sweden) E-   |  |                                  |                                     |         | E-mail (   | nail (mandatory)   |                              |   |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         |  |  |                              |   |  |
| Place and date   |  |   |   | Signature (authorized company signature, or guardian, if applicable) |   |                                     |  |                                  |                                     |         |  |  |                              |   |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         |  |  |                              | enship. If you have only a Swedish or contact their local bank for support. |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         | oving securities. Application t<br>Legal Entity Identifier Found                         |  |                              | e with support from your bank, but is also                                  |  |
| 6. By signing this sub • That I have read the pros   |  |   |   |  |   |                                     |  | ed with                          | ı inves                             | ting in | this particular financial  |  |                              |   |  |
| instrument; That I have read and und   |  |   |   |  |   |                                     |  | and Co                           | onditic                             | ns" in  | the prospectus;  |  |                              | application form by one of ng options:                                      |  |
| <ul> <li>That I have read and accepted the information stated on the subscr</li> <li>I have observed that the offer is not addressed to persons resident<br/>Africa, Hong Kong, Switzerland, Singapore or other countries where</li> </ul>                 |  |   |   | it in the  | in the USA, Australia, Japan, Canada, New Zealand, South  |                                     |  |                                  |                                     | - 1     | Mail:  | Subject: Monivent Sedermera Fondkommission   |                              |   |  |
| other measures other than those required by Swedish law;  That I am aware that the application is not covered by the right of reisales Act.  |  |   |   | return 1   | ommission, at the undersigned's expense, to implement the d in the prospectus issued by the board of Monivent AB in |                                     |  |                                  |                                     |         | Norra Vallgatan 64,<br>211 22 Malmö, Sweden  |  |                              |   |  |
| <ul> <li>That in signing this subscription form, I authorize Sedermera Fondki<br/>subscription of shares pursuant to the Terms and Conditions stated<br/>January 2020;</li> <li>That no amendments or additions may be made to the printed text</li> </ul> |  |   |   |  |   |                                     |  |                                  |                                     |         |  | E-mail:  | issuingservices@sedermera.se |   |  |
|  |  |   |   |  |   |                                     |  |                                  |                                     |         |  | Fax:   | 0046 40-54 90 79             |   |  |
| <ul> <li>That the allocation of shares in accordance with the subscription ca</li> <li>That an incomplete or incorrect subscription form may be disregare</li> <li>That the subscription is binding;</li> </ul>  |  |   |   |  | rded;   |                                     |  |                                  |                                     |         |  | Questions,<br>please call:   | Phone: 0046 40-615 14 10     |   |  |
| <ul><li>That no modifications or</li><li>That I am aware that Sed</li></ul>  | amendn<br>ermera l   | Fondkon                                     | nmissic                                 | on will n  | iot make ai   | ny asse:                            | ssment   |                                  |                                     |         | scription to the instrument  | •  |                              |   |  |
|  |  |   |   |  |   |                                     |  | ommis                            | sion a                              | nd the  | subscriber with respect to   |  |                              |   |  |
| this subscription;   |  |   | 24.                                     |  |   |                                     |  |                                  |                                     | 6 1     | F 11   |  |                              |   |  |

By checking this box, the subscriber agrees that information provided on the subscription form may also be used for communication regarding offers in the future.

That personal data supplied in connection with the assignment will be stored and processed by Sedermera Fondkommission for the purpose of administering this assignment;
That personal data will be stored and processed in accordance with the General Data Protection Regulation (GDPR).

## **MONEY LAUNDERING CHECK - NATURAL PERSON/ LEGAL ENTITY**

## In accordance with the Swedish act (2017:630) on measures against money laundering and terrorist financing

With reference to applicable regulations for the financial markets, including the rules on measures against money laundering and terrorist financing, the Swedish Financial Supervisory Authority (Finansinspektionen) has issued special regulations for supervised investment companies. The rules require investment companies to verify the identity of the parties with whom they transact business or for whom they perform transactions in accordance with a specifically prescribed arrangement.

Do you have any questions on how to fill out the form? Please call us on +46 (0) 40-615 14 10, and we will assist you.

| Note! If | you are a natural | person and not a com | pany, please | proceed to control | questions below. |
|----------|-------------------|----------------------|--------------|--------------------|------------------|
|          |                   |                      |              |                    |                  |

| Beneficial owner*  | 1 71   |   |  |   |  |  |  |  |  |
|--|--|---|--|---|--|--|--|--|--|
| Natural person (first name and sur   | name)  | Personal ID number  | Ownership (%)  | Share of votes (%)                      |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
| Natural person (first name and sur   | name)  | Personal ID number  | Ownership (%)  | Share of votes (%)                      |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
| Natural person (first name and sur   | name)  | Personal ID number  | Ownership (%)  | Share of votes (%)                      |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
| *Beneficial owners are:  |  |   |  |   |  |  |  |  |  |
| • Natural persons who, alon  |  | tely own more than 25% of the votes in the legal  |  |   |  |  |  |  |  |
| Natural persons who, alon     Natural persons who alon   | e or with related persons, has the                                       | e right to elect or dismiss more than 50% of the<br>sult of agreement with owners, members, the le      | e legal entity's board members or e                                  | equal executives.                       |  |  |  |  |  |
|  |  | ne company in accordance with the above.  | egai entity, regulations in the article                              | es of association, company              |  |  |  |  |  |
| There are no honoficial  | owners in secondance with the s  | have Sadarmara Fandkammissian will therefor   | a cancidar the company's Chairm                                      | an of the Reard CEO or other            |  |  |  |  |  |
| equivalent executive as t  |  | <b>bove.</b> Sedermera Fondkommission will therefor   | e consider the company's Chairm                                      | an of the board, CLO of other           |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
| If the ownership structur  | e is complex or comprises a num  | nber of ownership levels, or the legal entity is ow   | ned by a foundation, please contac                                   | ct Sedermera Fondkommission.            |  |  |  |  |  |
| Control questions relating t   | o measures against money laun  | dering and terrorist financing  |  |   |  |  |  |  |  |
| 1. What is the purpose with t  |  |   |  |   |  |  |  |  |  |
| Savings/investment   | Securities trading   | Other - please specify:   |  |   |  |  |  |  |  |
| 2. Origin of the capital (mu   | ltiple options are possible)   |   |  |   |  |  |  |  |  |
| Old savings  | Capital income   | Bonus Sale of property/co   | ompany   |   |  |  |  |  |  |
| Investments  | Salary/pension   | ☐ Inheritance/gift ☐ Company revenue  | Other - please specify:  |   |  |  |  |  |  |
| 3. What amount are you/ th   | ne company planning to invest t  | hrough Sedermera annually?  |  |   |  |  |  |  |  |
| 1-50 000 SEK   | 150 000-500 000 SEK  |   | 000 SEK or more.   |   |  |  |  |  |  |
| 50 000-150 000 SEK   | 500 000-1 000 000 SEK  | 3 000 000-5 000 000 SEK Please  | specify amount:  |   |  |  |  |  |  |
| 4. PEP – Politically expose  | d persons  |   |  |   |  |  |  |  |  |
| Have you/ any of the benefi  | icial owners or any of the compa   | ny's representatives (such as the CEO, board n  |  | zed signatories), any of their          |  |  |  |  |  |
| employees or any of their in   | nmediate family members been a   | a politically exposed person (PEP*) in the last 18  | 3 months?  |   |  |  |  |  |  |
| Yes No If the  | answer is Yes, please specify: Fur                                       | nction:   | Country:   |   |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
| The person's name and your relat   | ionship (if the person who held the fu                                   | nction is someone other than yourself):   |  |   |  |  |  |  |  |
|  |  | , or has held, an important public function in a go   |  |   |  |  |  |  |  |
| ramily members and close co  | illeagues snould also be treated as                                      | s PEPs. Examples are heads of state and of gove   | rnment, ministers, judges, ambassa                                   | dors and members of parliament.         |  |  |  |  |  |
| 5. Operations in high-risk j   | urisdictions or a jurisdiction aga                                       | inst which the EU or UN has decided on sanct  | ions   | . C : I I V                             |  |  |  |  |  |
| Ethiopia, Uganda, North Ko   | operations in any of the following<br>rea, Sri Lanka, Pakistan, Trinidad | g high-risk jurisdictions; Afghanistan, Bosnia an<br>I and Tobago or a jurisdiction against which the E | d Herzegovina, Guyana, Laos, Var<br>EU or UN has decided on sanctior | iuatu, Syria, Iran, Iraq, Yemen,<br>is? |  |  |  |  |  |
|  | , , , , , , , , , , , , , , , , , , ,                                    |   |  |   |  |  |  |  |  |
| Yes No If the answer is yes, please specify country:   |  |   |  |   |  |  |  |  |  |
| SIGNATURES   |  |   |  |   |  |  |  |  |  |
| The form must be signed and then sent, together with a scanned identity form and authorization document (such as a certificate of incorporation or a valid power of attorney), to the e-mail address listed below.   |  |   |  |   |  |  |  |  |  |
| to the e-mail address listed below.  |  |   |  |   |  |  |  |  |  |
|  |  | mission by mail to the following address: Norra V   |  |   |  |  |  |  |  |
| Valid identity checks: Swedish passport, Swedish driver's license or identity card issued by Swedish authorities or Swedish certified identity card. For persons who doesn't have Swedish identification forms, please provide passport or EU - driving license. |  |   |  |   |  |  |  |  |  |
| Documents to attach Natural Person:  Documents to attach Legal Entity:   |  |   |  |   |  |  |  |  |  |
| <ul> <li>A copy of the Identity document.</li> <li>A copy of the identity document for authorized</li> <li>A copy of a valid power of attorney or a certificate of incorporation</li> </ul>  |  |   |  |   |  |  |  |  |  |
|  | representat  | tives   | (No more than 1 month old)   |   |  |  |  |  |  |
| Signatures   |  |   |  |   |  |  |  |  |  |
| Place and date   |  | Signature of the Party/ Authorized signatory  | Print name/s   |   |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
|  |  |   |  |   |  |  |  |  |  |
|  | I confirm that all questions h   | ave been answered correctly and I will inform Se  | edermera in the event of any chang                                   | ges.                                    |  |  |  |  |  |