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Investment Management Liability Proposal Form

Note of Applicant

Please note that this proposal form is being completed by the **Applicant** on behalf of all Insureds (as defined in the policy).

For the purpose of this proposal form:

- > Applicant means all Investment Managers and Funds.
- > AUM means Assets/Funds Under Management.
- > BM means the Benchmark against which the corresponding Fund is measured (where applicable).
- > **Fund** means the trusts, investment trusts, funds, partnerships or other similar entities requesting insurance.
- > Investment Advisory Services includes investment advisory services.
- Investment Banking means mergers and acquisitions, corporate advisory/finance, facility issuance, corporate restructuring or securities underwriting.
- Investment Manager means the investment manager/advisor entities requesting insurance and their and their Subsidiaries (as defined in the policy).
- > NAV means Net Asset Value.
- > **Proposal** means this signed proposal form, the statements, warranties, and representations herein and all attached supplementary information and materials.

Please provide all monetary amounts in US\$ when completing the questions below.

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1. Investment Manager Details:

1.1 Is cover sought only in relation to a **Fund**?

□ Yes □ No

If 'Yes', please proceed to Section 2 'Fund Details'.

1.2 Investment Managers (please attach an additional sheet as necessary):

Name of street names	Wainaddress	countral station	Date established	Annual Free	Anentenentes Managervices	AND	the ncone	Income definition the	Previous Year.
				Current Year, 200	Previous Year, 200	Current Year, 200	Previous Year, 200	Current Year, 200	Previous Year, 200



1.3 Please provide a detailed description of the business activities for each **Investment Manager** listed above:

(b) Does any Investment Manager provide Investment Banking services?	C Yes
f 'Yes', please provide the percentage of Investment Banking income out of he total income:%	
Are all Investment Managers authorised to conduct Investment Advisory Services in all jurisdictions in which they are active?	□ Yes
f 'No', please explain:	
Does any Investment Manager provide Investment Advisory Services in the United States or Canada or are they registered with the U.S. Securities and Exchange Commission ('SEC') under the Investment Advisors Act of 1990?	□ Yes
f 'Yes', please provide the date of registration:	
(a) Has any Investment Manager taken over the management of any Fund within the last 12 months?	Yes
(b) If 'Yes', please describe how that Investment Manager protected itself from	
the liabilities of the previous investment advisor(s) which it succeeded?	
the liabilities of the previous investment advisor(s) which it succeeded?	□ Yes



GRAND TRUST UNDERWRITERS FLAT D, 10/F., WORLD TRUST TOWER, 50 STANLEY STREET, CENTRAL, HONG KONG

2. Fund Details

2.1 Please detail for all Funds proposed for insurance or managed by an Investment Manager (please attach an additional sheet as necessary):

Name of Fund	country of relief	Date establised	LUM	5.000	Benchman Hame	Annualise	dele avri	Annualise	delle yrst	Annualise	the pion	Wayber is a state of the state
			Current Year, 200	Previous Year, 200		Fund	BM	Fund	BM	Fund	BM	% of NAV

3. General Applicant Questions

Please complete the following section in respect of the **Applicant** (note that **Applicant** means all **Investment Managers** and **Funds**).

3.1	Has the Applicant been involved in, or been the subject of, any merger, acquisition, tender offer, buy-out or change in equity structure in the past 5 years?	□ Yes	🗆 No
	If 'Yes', please provide full details:		

3.2	Is the Applicant or any of its directors or officers aware of any plans for		
	a merger, acquisition, tender offer, buy-out or a change in equity structure?	Yes	🛛 No

If 'Yes', please provide full details on a separate sheet.

3.3 Please detail the following in respect of the Applicant:

		Current Year, 20 <mark>0</mark>	Previous Year, 20
	Total AUM :		
(b)	Total AUM in Funds :		
(c)	Total AUM in private client mandates or managed on a sub-advisory basis:		
(d)	Asset value of the largest account:		
(e)	Total number of accounts lost:		
(f)	Total value of lost accounts:		
(g)	Total AUM managed on a discretionary basis:		
(h)	Total AUM managed on a non-discretionary basis:		
(i)	Estimate of the percentage of the AUM invested in listed securities:		
(j)	Estimate of the percentage of the AUM invested in unlisted- securities/private equity/venture capital:		
(k)	Estimate of the percentage of the AUM invested in real property assets:		
(I)	Estimate of the percentage of the AUM invested in derivatives or a specialist investment strategy (including hedge funds):		

3.4 Please provide the percentage split of investor base by type out of total **AUM** in respect of the **Applicant**:

	Type of Investor	Current Year, 20	Previous Year, 20	Minimum Accepted Investment
	Governments:			
(b)	Corporates/Financial Institutions:			
(c)	Trusts/Family Trusts:			
(d)	High Net Worth Individuals/Accredited Investors (Non-US domiciled):			
(e)	High Net Worth Individuals/Accredited Investors (US domiciled):			
(f)	Non-accredited/Retail Investors (Non- US domiciled):			
(g)	Non-accredited/Retail Investors (US domiciled):			
(h)	Others, (please specify):			

3.5 Does the **Applicant** have procedures and systems in place to ensure:

	(a)	transaction decisions/executions are appropriately approved when the chief investment officer is unavailable?	Yes	🗆 No
	(b)	trading policies and dealing limits are clearly defined and communicated to relevant employees and subsequently enforced?	Yes	🗆 No
	(c)	any unauthorised trading or trading errors are identified, monitored and, where necessary, rectified as they occur?	Yes	🗆 No
	(d)	counter-parties receive authorised confirmation for all deals prior to settlement?	Yes	🗆 No
	(e)	a formalised due diligence process is followed when assessing any given investment strategy?	Yes	🗆 No
	(f)	suitable financial advice is given and recommendations are made according to investors' objectives/risk aversion?	Yes	🗆 No
	(g)	investments are periodically substantiated and evaluated against recorded values independent of the Fund Manager or dealer?	Yes	🗆 No
	(h)	redemption requests are processed correctly, without the risk of fraudulent redemptions, in a timely manner, and funds are remitted correctly?	Yes	🗆 No
	(i)	compliance by all employees with applicable laws, principles, codes and guidelines?	Yes	🗆 No
	(j)	employee trading accounts are tracked?	Yes	🛛 No
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If the response to any of the above is 'No', please provide full details on a separate sheet.

3.6	Are all publications, marketing literature, or other product services communications (electronic or documentary), subject to sign off by the business unit manager, compliance and legal department?	□ Yes	🗆 No
	If 'No', please provide full details on a separate sheet.		
3.7	(a) Does the Applicant use standard written agreements/contracts/letters of offer setting out the terms and conditions of the services provided?	Yes	🗆 No
	(b) If 'Yes', do all such agreements/contracts/ letters of offer contain indemnities/limitations on the Applicants liability?	Yes	🛛 No
	If the response to either of the above is 'No', please provide full details on a separate sheet.		
3.8	(a) Does the Applicant appoint any agents to distribute units of Funds ?	Yes	🛛 No
	(b) If 'Yes', does the Applicant regularly monitor/audit the quality of service and advice provided by such agents?	Yes	🗆 No
3.9	Have there been any changes or modifications to the investment restrictions or limitations of any investment Fund during the past 2 years?	Yes	🗆 No
	If 'Yes', please provide full details on a separate sheet.		
3.10	Have there been any material changes in the administrative operations or investment policies of any Applicant during the past 2 years?	Yes	🗆 No
	If 'Yes', please provide full details on a separate sheet.		
3.11	Does the Applicant foresee any Fund being liquidated or restructured over the next 12 months?	□ Yes	🗖 No
	If 'Yes', please provide full details on a separate sheet.		
3.12	Does the Applicant impose redemption fees on investors who redeem shares/units in a Fund within a short period of time?	Yes	🗆 No
	If 'No', please provide how 'market timing' (the practice of making short-term purchases and sales of Funds) is discouraged:		
3.13	Does the Applicant 's computer system automatically 'prevent' breaches of investment mandates or engagement letters?	Yes	🗆 No
	If 'No', please detail how such breaches are prevented:		
	Does the Applicant have an employee Handbook/Manual?	□Yes	□No
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If 'Yes':

	(a) does it contain written instructions on all aspects of your business?	Yes	🛛 No
	(b) does it clearly define the individual duties of each employee?	□Yes	🛛 No
	(c) does it address security procedures (including electronic data security)?	□Yes	🛛 No
	(d) does it address personal trading practices of employees and other persons who have access to information about portfolio holdings of Funds (including pre-clearance of personal account trades, 'blackout' periods, limitations on short-term trading, use of non-public information)?	□Yes	□No
3.15	Please provide the following in respect of the Applicant :		
	(a) name of external auditor:		
	(b) frequency of external audits:		
	(c) number of dedicated internal audit staff:		
3.16	been implemented?	□ Yes	🗆 No
	If 'No', please provide details of any outstanding matters and a timeline for completion on a separate sheet.		
3.17	(a) Name of external law firms routinely acting for the Applicant :		
	(b) Please detail the type of work for which external law firms are typically engage	ged:	
3.18	Has the Applicant or any entity proposed for insurance, or any of its directors, officers, partners or employees been subject to any regulatory investigation in the last 5 years?	□ Yes	□ No
	If 'Yes', please provide details on a separate sheet including details of any resulting disciplinary proceedings, admonishments or recommendations.		
3.19	If applicable, are all recommendations made following a regulatory visit fully implemented?	Yes	🗆 No
	If 'No', please provide details on a separate sheet.		

4. Insurance History

4.1 Please provide the following information/details for pre-existing insurance policies:

Туре	Insurer	Limit (\$,000)	Deductible (\$,000)	Period
(a) Directors Officers Liability:				
(b) Professional Indemnity:				
(c) Fidelity:				

^{4.2} Has any insurer ever cancelled or non-renewed any insurance policy held by the **Applicant** of the type listed above?

If 'Yes', please explain:

5. Claims Information

This Section MUST be completed by the Applicant.

5.1	Is the Applicant aware, after full enquiry, of any form of client complaint (brought by a client, or on their behalf by a regulator)?	□Yes	□No
	If 'Yes', please provide full details on a separate sheet.		
5.2	Has any claim been brought against the Applicant or any of its directors, officers, partners, trustees or employees during the last 5 years?	□Yes	□No
	If 'Yes', please provide full details on a separate sheet.		
5.3	Does the Applicant , or any of its directors, officers, partners, trustees or employees, after full enquiry, have any knowledge of any act, omission, event or circumstance which could give rise to a claim?	□Yes	□No
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If 'Yes', please provide full details on a separate sheet.

6. Required Information

Please enclose with this proposal form:

۶	The latest Annual Report and Financial Accounts of the Applicant.	
۶	A copy of standard engagement letters and/or service agreements.	
۶	An organisational chart.	
۶	A copy of the latest performance report for each Fund .	
۶	The Prospectus/Information Memorandum for each Fund.	
۶	CV's/Resume's for all Directors of the Applicant .	
۶	Any supplementary information which is material to any questions herein (on the Applicant's company letterhead paper)	

7. Declaration

The undersigned authorized Chairman of the Board, President or General Partner of the Applicant:

- declares that this **Proposal** has been completed after full enquiry and that the statements and particulars herein are true and that no material facts have been misstated or omitted; and
- agrees that if the information supplied in this **Proposal** changes between the date of this **Proposal** and the effective date of the insurance, he/she (undersigned) will, in order for the information to be accurate on the effective date of the insurance, immediately notify the Insurer of such changes, and the Insurer may withdraw or modify any outstanding quotations and/or authorisations or agreements to bind the insurance; and
- agrees that this **Proposal** shall be the basis of the contract should a policy be issued, and it will be attached to and become part of the policy.

Signed
Title
(Must be signed by Chairman of the Board, President or General Partner)
Company
Date

Signing this proposal form does not oblige the Applicant to purchase any insurance.