Account Opening Form



The Sun Life Prosperity Funds, referred to as "Funds," are all managed and distributed by Sun Life Asset Management Company, Inc. (SLAMCI), a member of the Sun Life group of companies.

In this form, you and your refer to the investor, while we, us, our, and the Company refer to SLAMCI.

IMPORTANT INFORMATION ABOUT PROCEDURES FOR OPENING A NEW ACCOUNT:

Any information provided in this form and in the course of opening a mutual fund account will be used to allow the Company to identify you and/ or verify your information. This is to ensure that we protect you, your application, and your transaction with the Company from being used for money laundering and terrorist financing activities.

IMPORTANT NOTES:

A Principal Investor Information

You must accomplish and submit the completed form and requirements to any of our Client Service Centers. All signed documents sent via e-mail shall be treated as original copies. For inquiries, please send an e-mail to sunlink@sunlife.com. Please write legibly by using CAPITAL LETTERS. Write N/A if the question is not applicable. Mark the box(es) with a " \checkmark " to indicate your choice(s) then sign the form only when completely filled out.

1. Type of Account 2. For joint account, please choose one: Individual Joint		Joint AND (all signatures must be present for all transactions) Joint OR (at least one of the signatures must be present for all transactions)						
3. Name of Investor				· · · · · · · · · · · · · · · · · · ·		•		
Last Name								
First Name								
Middle Name								
Other Legal Name								
4. Permanent Home Addres	SS [No., Street, Villag	e/Subdivision, Barangay, C	City/Municipality	r, Province/State, Country (P.O B	ox is not acceptable)]	5. Zip Code		
Present Home Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (PO Box is not acceptable)] Same as Permanent Home Address 7.								
8. Mobile Phone (country code	e, mobile no., e.g. +6	39123456789) 9 . E	Birthdate	Day Month	Year	10. Citizenship		
+			e.g. 08-AUG-199	•	_	·		
11. Work Phone (country code, a	rea code. & tel. no e.s	. +63285558888) 12. H	Home Phone	(country code, area code, & tel.	no., e.g. +63285558888)	13. Gender		
+		+				Male		
 Birthplace (City/Province/Sta 	ite and Country)	15. Preferred Mailir	ng Address		16. E-mail Address	Female		
,	,,	Permanent	Home Addre	ess Work Address				
17. O	10 0	Present Hor		2 Name of Free laws (D.	i 20 Net-	£\\/ - /Di		
17. Occupation	16. G	ross Annual Income	'	9. Name of Employer/Bi	usiness 20. Natu	re of Work/Business		
21. Work Address [No., Street, V	/illage/Subdivision, I	Barangay, City/Municipality	y, Province/State	e, Country (P.O. Box is not accept	table)]	22. Zip Code		
23. SSS No. or GSIS No.			2	4. Philippine Tax Identifi	cation No. (TIN)	,		
				_	_			
25. ID Presented	26. IC	No.	2	7. ID Expiry Date D (e.g. 08-AUG-1990)	ay Month	Year —		
Compliance with the Foreign			A)					
he following information is co			6.1			S		
A "U.S. Person" is (i) an individ the United States for income								
For additional information or individuals/international-taxp	_				tax purposes, please	see https://www.irs.gov,		
28. Are you a U.S. Person?		Yes	No					
If Yes, please indicate yo	ur U.S. Taxpaye			OW.				
*Your U.S. TIN may be any of	the following: 11	S Social Security Nur	mher (SSNI) =	mplover Identification Nu	mber (FIN) or Individu	ual Taxpaver Identification		
Number (ITIN). If you are a U .	_					au Tanpayer Identificatio		

	Co-investor information (if app		~/						
29.	Name of Investor								
	Last Name								
	First Name								
	Middle Name								
	Other Legal Name								
30.	Permanent Home Address [No., Str	eet, Vil	lage/Subdivision, Ba	ırangay, City/Munici	pality, Prov	vince/State, Country (P.O. Box is not	acceptable)]		31. Zip Code
32. Present Home Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)] Same as Permanent Home Address									33. Zip Code
34. Mobile Phone (country code, mobile no., e.g. +639123456789) 35. Birthdate Day Month Year 36. Citizen									Citizenship
+				(e.g. 08-AUG-1	1990)				
37.	Work Phone (country code, area code, & te	l no., e.g	+63285558888)	38. Home Pho	one (coun	try code, area code, & tel no., e.g. +6.	3285558888)	39.	Gender
+				+					Male Female
40.	40. Birthplace (City/Province/State and Country) 41. Preferred Mailing Address Permanent Home Address Present Home Address Present Home Address						SS		
43.	Occupation	44. (Gross Annual Ind	come	45. Na	ame of Employer/Business	46. Nature o	of Wo	ork/Business
47.	Work Address [No., Street, Village/Subo	division	, Barangay, City/Mu	nicipality, Province/	State, Cou	ntry (P.O. Box is not acceptable)]	1		48. Zip Code
49.	SSS No. or GSIS No.				50. Ph	nilippine Tax Identification N 	o. (TIN)		
51.	ID Presented	52. I	D No.		1	Expiry Date Day 08-AUG-1990) —	Month —		Year
	apliance with the Foreign Account of following information is collected for								
1	U.S. Person" is (i) an individual who i United States for income tax purpo					* *			
	additional information on determi ividuals/international-taxpayers/su	_					oses, please see	e <u>http</u>	os://www.irs.gov/
54.	54. Are you a U.S. Person? Yes No If Yes, please indicate your U.S. Taxpayer Identification Number (TIN) below.								
	*Your U.S. TIN may be any of the following: U.S. Social Security Number (SSN), Employer Identification Number (EIN), or Individual Taxpayer Identification Number (ITIN). If you are a U.S. Person but do not have a U.S. TIN, this application will not be processed.								
С	In-Trust-For (if opening an acc	ount	for a minor)						
55.	Name of Minor								
	Last Name								
	First Name								
	Middle Name								
56.	Relationship to the Investor/Trus	tee	57. Birthplace (Ci	ity/Province/State and	d Country)	58. Birthdate Day (e.g. 08-AUG-1990)	Month _	_	Year

<u>Note:</u> A Confirmation of In-Trust-For (ITF) Arrangement must be submitted together with a copy of the Birth Certificate or Passport of the minor for all ITF accounts.

D Investor Suitability Assessment

<u>To be answered by the PRINCIPAL INVESTOR only</u>: This assessment will let you know your risk profile and investment experience based on the information you provide. Your financial needs may change over time depending on your current objectives and situation. This assessment is for reference only and is not to be taken as an advice from SLAMCI on how to manage your investment. No guarantee is given as to the accuracy or completeness of this test.

59.	Net Investible Assets									
	PHP 1,000,000 and below	PHP 1,000,001 - PHP 5,000,	000 PHP 5,00	00,001 - PHP 10,000,000	Over PHP 10,000,000					
60.	Most Important Investment (Goal								
	Prepare for retirement	Purchase a property	Open a l	Open a business Provi						
	Grow your money	Others, please specify								
61.	61. How familiar are you with investing?									
	No experience at all		Some experience (you have mutual funds, UITFs or V	UL)					
	A little experience (you hav	ve bank deposits)	Advanced experier	nce (you have direct investment in	n stocks/bonds)					
62.	You currently or used to have	(please check all that apply):								
	Life Insurance	Pre-need Plan	Mutual Funds	Bank Deposits	Bonds					
	Stocks	Own Business F	Real Estate Property	Pooled Funds	Others					

Choose the statement that most closely defines your needs or best describes your situation. After completing the assessment, add the points in brackets corresponding to your choice to get the total score.

A - TIME HORIZON:

How long can you keep your money invested?

- [1] 1-5 years
- [3] 11 15 years
- [2] 6 10 years [4] More than 15 years

B - RISK AND RETURN:

How would you best describe your attitude towards investing and the level of risk you can take?

- [1] Seeks capital preservation. Stable returns are preferred as opposed to funds that fluctuate widely.
- [2] Comfortable with volatility, and ready to accept
- fluctuations affecting less than half of my investments.

 [3] Comfortable with volatility, and ready to accept
- fluctuations affecting more than half of my investments.

 [4] Seeks capital appreciation. Fully accepts volatility to ensure higher returns over the long term.

C-FINANCIAL SITUATION:

Which statement best describes your financial situation?

- [1] This investment will supplement current income.
- [2] This investment is not needed to supplement current income, however this could change.
- [3] Should an unexpected situation arise, there may be a need to access these funds.
- [4] Can meet emergency requirements without withdrawing these funds.

_ Total Score _	Score	Investment Profile
Г 1	3 to 6	Conservative
LJ	7 to 9	Moderately Aggressive
	10 to 12	Aggressive

We strongly recommend you review your investment risk profile at least once a year. When a major change occurs in your personal situation, make sure your investment decisions continue to match your needs.

The allocation of your investment should be consistent with your assessed risk profile based on the results of this assessment. Should you decide otherwise at any time, you are responsible for the decision and any of its effects. SLAMCI, its agents, employees, or directors, will not be liable to you for any claims, loss, or action as a result of your decision.

E Initial Investment Details

You may invest regularly from your account with any of SLAMCI's participating banks. To register, fill out the Auto-Invest Enrollment Form. If the investment is coursed through an advisor, always request for an Acknowledgment Receipt (A.R.).

Note: * Front-end load are charges to be paid by the investor at the time of investment.

Existing investments in other instruments (time deposits, etc.)

Income / bonus from employment

Proceeds from sale of assets (real estate, etc.)

** Back-end load are charges to be paid by the investor at the time of redemption, based on the number of years invested.

63. Fund Name (1)	Sales Load:	Front-En	d Load*	Back-End Load** Others				
	Amount Paid:	PHP	USD	, , , ,				
	Amount in Words:							
Payment Details								
Cash				Direct Deposit to SLAMCI Bank Account				
Check (To be processed only upo	on receipt of cleared funds)			Name of the Bank:				
				Transfer from Sun Life Insurance Policy / Plan Agreemen				
Check No.:				Telegraphic Transfer				
Drawee Bank:				Others				
64. Fund Name (2)	Sales Load:	Front-E	nd Load*	Back-End Load** Others				
	Amount Paid:	PHP	USD	, , , , .				
	Amount in Words:							
Payment Details	•							
Cash				Direct Deposit to SLAMCI Bank Account				
Check (To be processed only upo	on receipt of cleared funds)			Name of the Bank:				
				Transfer from Sun Life Insurance Policy / Plan Agreemen				
Check No.:				Telegraphic Transfer				
Drawee Bank:				Others				
65. Source of Funds								

MFAO.01.18 3134/18/29 Other sources, please specify:

Matured pre-need plan / insurance policy

Inheritance

F Settlement Bank Account Enrollment (if applicable)

Enrollment of settlement bank account is subject to the following guidelines:

- Only one settlement bank account shall be enrolled per currency, per MF Account. You may use the same settlement bank account for your other MF Account(s), provided it/they pertain(s) to the same accountholder(s).
- Your settlement bank account name must be <u>exactly the same</u> (in order, format, and joint account type when applicable) as the MF Account Name to be created, in order for redemption and other proceeds to be credited by the bank.
- SLAMCI will credit <u>all future redemptions and other proceeds from all Funds</u> to your enrolled settlement bank account. We will not be liable for delays in, or unsuccessful crediting of redemption and other proceeds due to errors or discrepancies in bank account name and/or other information provided.
- Any new enrollment or updates to your settlement details is subject to SLAMCI's review and will supersede previously enrolled settlement bank
 accounts.

Currency (whichever is applicable)	Bank Name	Bank Account Number (SA/CA)
66. Philippine Peso (PHP) Settlement Bank Account		
67. US Dollar (USD) Settlement Bank Account		

Requirement for Proof(s) of Bank Account Ownership:

- As an extra validation measure, please provide <u>any one (1)</u> of the documents below as proof that you are the authorized owner(s) of the settlement bank account(s) nominated above:
 - a. Bank Statement of Account
- d. Check
- f. Machine-validated Withdrawal Slip

- b. Certificate of Bank Deposits
- e. ATM Card showing the bank
- g. Machine-validated Deposit Slip

- c. First Page of the Account Passbook
- account number
- The bank account number(s) and the account name(s) must appear on <u>one (1) page</u> and should be readable and clear. <u>SLAMCI may require presentation of additional documents to validate your submission(s).</u>

68. Lower Front-End Sales Load (If you wish to reduce your sales load to 1.5% or lower, VAT exclusive)
You may apply for this privilege if you have an aggregate investment of at least PHP 100,000 in your own and qualified related* mutual fund accounts, subject to SLAMCI's approval.

 * Refers to parents, spouse, children, siblings, grandparents, and grandchildren.

Account Number	Full Account Name (Last Name, First Name, M.I.)	Relationship to Investor

H Compliance with the Anti-Money Laundering Act (AMLA)

Politically Exposed Person Determination

The Anti-Money Laundering Act requires us to establish and record the identity of politically exposed persons and their immediate relatives.

	, , , , , , , , , , , , , , , , , , , ,	, 1	,	
69.	 Have you, any of your co-investor(s), or any immediate relatives* (livestories appointed government position of this country or another? 	J	reased) ever held or are currently holding an elected or No	
	If Yes, specify Name and Position			
	*Refers to parents, spouse or common law partner, children, siblings, and in-laws.			

Third Party/Beneficial Owner Determination

A third party/beneficial owner is a person or institution who funds, owns, or controls the account on behalf of the investor(s). The third party/beneficial owner has full control of all activities or transactions connected with the account.

70. Is there any Third Party/Beneficial Owner, other than the owner, who:		
a) funds any of the investments?	Yes	No
b) has access, use, or any kind of financial interest in the account?	Yes	No
c) on whose behalf the transaction or activity is being conducted?	Yes	No

If there is a Third Party/Beneficial Owner, provide details below:

71.	71. Name (Last, First, M.I.) / Business Name				72. Relationship to the Investor 73.			73. Occupation			
74.	Permanent Address [No., Street, Villa	age/Subdivision, I	Barangay, City/Mu	nicipality, Pr	ovince/Stat	e, Country (P.O. Bo	x is not acceptabl	le)]	75. Zip Code		
76.	Birthdate (e.g. 08-AUG-1990)		77. Birthplac	e (City/Prov	vince/State and Country) 78. Philippine			ne Tax Identificatio	Tax Identification No. (TIN)		
	Day Month	Year									
								_	_		
								1			
79.	Type of Entity	80. Nature	of Business	81. Date	of Incorp	ooration (e.g. 08-	AUG-1990)	82. Country	y of Incorporation		
	(e.g. corporation/partnership, etc.)			Da	ıy	Month	Year				
					_	_					

MFAO.01.18 3134/18/29

I Electronic Transactions

By opening an account, your e-mail will be automatically registered to our "My Sun Life Client Portal" at www.sunlife.com.ph where you can view your account, Electronic Statement(s) of Account (e-SOA), and make subsequent transactions.

You may also e-mail SLAMCI at RequestSLAMCI@sunlife.com so we can process the applicable documents for your subsequent transactions. Subsequent transactions include: additional investments, redemptions, and/or fund switches. All signed documents sent by email shall be treated as original copies. Transactions received after the cut-off time will be processed on the next business day.

You are responsible for the security of your account and data. SLAMCI is not liable for losses resulting from data transfer delays, unauthorized access, or misuse of your online account.

J Terms and Conditions

Eligible Investor

Any person of legal age, regardless of citizenship or nationality, may hold shares/units of the Fund(s).

Purchase Price

The principal amount of investment shall purchase the corresponding number of Fund shares/units at the applicable Net Asset Value Per Share (NAVPS)/Net Asset Value Per Unit (NAVPU), less any sales load and taxes. The applicable NAVPS/NAVPU will be used for purchases made within the daily cut-off time.

Redemption and Fund Switch

SLAMCI shall honor valid redemption and fund switch requests any day it is open for business. A duly-endorsed Stock Certificate/Certificate of Participation, if issued, shall serve as proof of redemption. Shares/Units of the Fund will be redeemed using the applicable NAVPS/NAVPU at the close of business on the same day, less any applicable charges and taxes, if SLAMCI receives the redemption and fund switch request by the cut-off time. If the request is received after the cut-off time, the price will be the applicable NAVPS/NAVPU of the next business day. Applicable NAVPS/NAVPU to be used for switch-in will be based on the applicable settlement date of each Fund.

Proceeds from the request, less fees and taxes (if any), shall be available within seven (7) banking days from the receipt of the request. SLAMCI reserves the right to change the daily cut-off time as may be allowed by law.

Limited Liability

You agree to hold SLAMCI, its affiliates, employees and agents free and harmless from and against any and all claims, losses, including opportunity loss, damages, or expenses due to failure or delay to process your transaction(s), or inability to accept your transaction(s), except those losses, damages, or expenses directly arising from SLAMCI's willful misfeasance, bad faith, gross negligence, or reckless disregard of the duties involved in the conduct of its office.

Right to Accept or Reject Subscriptions; Adjustment of Account

SLAMCI reserves the right to accept or reject any application at its sole discretion, as determined by the law or its policies. If this application is not accepted in whole or in part, SLAMCI will refund the corresponding investment to the investor without interest, within ten (10) business days from the date of submission of this application. SLAMCI is authorized to close your account(s) or effect any adjustments on any of your account(s),

to correct any error or mistake committed, without need for any further instrument or consent.

Delivery of Stock Certificate/Certificate of Participation

A Stock Certificate/Certificate of Participation shall be issued upon a written request from the investor. Shareholders/Unitholders who do not elect to receive Stock Certificates/Certificates of Participation have the same rights of ownership as if certificates had been issued to them.

Applicable Laws

This application and related documents shall be governed by and interpreted in accordance with local or foreign laws that apply to SLAMCI. Any legal action arising thereupon shall be filed exclusively before the courts of Makati City, Philippines.

This application is governed by the terms and conditions of the Prospectuses of the Sun Life Prosperity Funds.

Compliance with the FATCA

The Company has a statutory liability to provide your information to the appropriate authority. In case of any change in your circumstances, including but not limited to citizenship, you shall inform the Company within 30 days of such change, and accordingly submit the applicable documents.

Compliance with the Data Privacy Act of 2012 (Republic Act No. 10173) You agree that the Company shall process your personal data, whenever applicable to: a) evaluate your application and administer your account; b) process transactions and enforce/fulfill contractual rights/obligations; c) improve the provision of products and services (including improvement in systems and business processes, data analytics, automated processing, etc.); d) comply with legal obligations, as well as laws and regulations (domestic or foreign); and e) manage risks and pursue its legitimate interests, including verification and obtaining additional personal data from third party sources. The Company may disclose your personal data to its affiliates, service providers, and other third parties for processing consistent with the foregoing purposes, who shall be bound by contractual or other reasonable means to protect your personal data. Your personal data shall be retained for the duration or existence of your account(s) and/or upon the later of the expiration of the retention limit set by Company standards, and by laws and regulations, counted from account closure. You certify that you understand and agree with the declarations and authorizations above and the Company's privacy policy at https://online.sunlife.com.ph/privacy.

K Investor's Acknowledgment and Agreement

You confirm that:

- a. You are performing this transaction while in the Philippines.
- b. All information provided in this form are true, correct, and complete. All agreements made with SLAMCI are set out in this form.
- If applicable, you declare under pain of criminal and/or civil liability that you are the owner of the stated settlement bank account(s). We will not be liable if the proceeds are credited to an erroneous bank account due to your fault or negligence. Bank charges, if any, will be taken from your account.
- d. If applicable, crediting of redemption and other proceeds to your designated settlement bank account number or account name fully releases and discharges SLAMCI from any claims or liabilities related thereto.
- e. The funds where the investments are sourced from were not generated from, or in any way related to, any of the unlawful activities listed in the Anti-Money Laundering Act (AMLA) and the Terrorism Financing Prevention and Suppression Act (TFPSA).f. You consent to be bound by the obligations set out in the AMLA, TFPSA, and relevant United Nations Security Council Resolutions (UNSCR) relating
- f. You consent to be bound by the obligations set out in the AMLA, TFPSA, and relevant United Nations Security Council Resolutions (UNSCR) relating to the prevention and suppression of terrorism, terrorist financing, and financing of proliferation of weapons of mass destruction, including the freezing and unfreezing actions as well as prohibitions from conducting transactions with designated persons and entities. In this regard, you authorize the Company to freeze and unfreeze your account pursuant to UNSCR and issuances of the Anti-Money Laundering Commission (AMLC), regardless of the filing of civil forfeiture proceedings.
- g. You agree to immediately send the required/updated information to SLAMCI if any of the information has changed, every three (3) years after account opening or anytime upon SLAMCI's request. Otherwise, we may refuse to accept additional subscriptions and fund switches, or terminate your account, in which case you shall receive the redemption value of your shares/units based on the NAVPS/NAVPU as of termination date.
- h. You have received, read, and understood the Funds' prospectuses, financial statements, policies, and these terms and conditions.
- i. Electronic or digital signatures or sign-in-wraps utilized in this form shall have the same force and effect as a manual signature. You understand the risks and assume full responsibility for all your electronic transactions, and warrant that SLAMCI can rely on your electronic signatures and/or instructions via electronic means. We do not assume any responsibility for technical errors, failure to access, delay or any similar occurrences beyond our reasonable control.
- j. We can make adjustments to your account(s) to correct any error and modify or terminate any investor privilege, and that we have the right to terminate your account for any violations of our policies and charge you a fee. Should you violate any of our terms/conditions/policies, we may terminate your account and charge a fee, in which case you shall receive the redemption value of your shares/units based on the applicable NAVPS/ NAVPU as of termination date.
- k. For Joint OR and AND accounts, shares/units shall be divided proportionately among the investors, rounded down to the nearest whole number for shares or two (2) decimal places for units. Any excess shall belong to the principal investor.

83. Printed Name and Signature of Investor	Please sign here	84. Date of Signing (e.g. 08-AUG-1990)	Day —	Month —	Year r
85. Printed Name and Signature of Co-Investor	Please sign here —	86. Date of Signing (e.g. 08-AUG-1990)	Day —	Month —	Year r

87. Would you like to receive personalized communication and product offers from Sun Life Asset Management Company, Inc. (SLAMCI), Sun Life of Canada (Philippines), Inc. (SLOCPI), Sun Life Investment Management and Trust Corporation (SLIMTC), and other members of the Sun Life group that may help you with your financial needs? Yes No

Declaration of Mutual Fund Representative/Relationship Manager/Broker

You confirm that:

- a. You obtained satisfactory evidence to establish the accuracy of the information in this form and the investor's true identity.
- b. You met the investor personally or via video conference to perform the appropriate Know-Your-Client (KYC) process.
 c. You performed the appropriate KYC process based on the AMLA and Company policies, and you shall inform us immediately of your opinion about the investor's integrity/reputation.
- d. Any advisor who is confirmed to have violated the above requirements may be subject to appropriate action.
- e. You advised the investor(s) that transactions will only be processed upon submission of complete information, documentary requirements, and
- f. You performed sufficient research to ensure that the product(s) selected is consistent with the result of the investor's risk profile assessment. g. You explained all the risks related to the investment, in case this differs from the recommended product(s).

88. Printed Name and Signature of MF Representative/Relationship		89. A.R. No. Issued	90. Date of Signing (e.g. 08-AUG-1990)				
Manager/Broker	Please sign here			Day	Mor	nth	Year
						_	
91. Representative's Code	92. Branch		93. Lead Conversion Number				
94. Required* : Relationship with the investor(s	5)						

 $\underline{\textit{Note:}}$ For KYC purposes, describe how you met or knew the investor(s) in 250 words or less.

For Office Use Only					
96. Time Received	97. Receiving Department/Office				
) (6. Time Received				

MFAO.01.18 3134/18/29

Page 6 of 6 Serial No. NW00000000