Account Opening

Sun Life Asset Management

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 Financial group of companies.

In this form, *you* and *your* refer to the investor/company's authorized signatory, while *we, us, our,* and the *Company* refer to SLAMCI.

IMPORTANT NOTES:
You must accomplish and submit the completed form and a copy of your valid ID as well as of your co-investor's to any of our Client Service Centers. For inquiries, please send an email to sunlink@sunlife.com.

Please write legibly by using **capital letters.** Write N/A if question is not applicable. Mark the box(es) with an "X" to indicate your choice(s) then sign the form only when completely filled out.

A Principal Investor Information

1. Type of Account ☐ Individual ☐ Joint
2. For joint account, please choose one: ☐ 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 Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O Box is not acceptable)]
5. Zip Code
6. Present Home Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O Box is not acceptable)] ☐ Same as Permanent Home Address
7. Zip Code
8. Mobile Phone (country code, mobile no., e.g. +639123456789) +
9. Birthdate (e.g. 08-AUG-2008) Day – Month – Year
10. Citizenship
11. Work Phone (country code, area code, & tel. no., e.g. +6325558888) +
12. Home Phone (country code, area code, & tel. no., e.g. +6325558888) +
13. Gender ☐ Male ☐ Female
14. Birthplace (City/Province/State and Country)
15. Preferred Mailing Address ☐ Permanent Home Address ☐ Work Address ☐ Present Home Address
16. E-mail Address
17. Occupation
18. Gross Annual Income
19. Name of Employer/Business
20. Nature of Work/Business
21. Work Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)]
22. Zip Code
23. SSS No. or GSIS No.
24. Philippine Tax Identification No. (TIN) – –
25. ID Presented
26. ID No.
27. ID Expiry Date (e.g. 08-AUG-2008) Day – Month – Year

Compliance with the Foreign Account Tax Compliance Act (FATCA)
The following information is collected for regulatory compliance.

A "U.S. person" is any individual who falls under the following categories: a natural born U.S. citizen, a naturalized citizen of the United States of America, non-U.S. citizen who resides in the United States of America for income tax purposes, or a permanent resident of the United States of America with a valid Permanent Resident Card (Green Card).

**Please refer to https://www.irs.gov/individuals/international-taxpayers/substantial-presence-test for more information about "U.S. persons."*

28. 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).*

29. If you are a U.S. Person but do not have a U.S. TIN, please indicate the reason below:
    - ☐ I am waiting for the U.S. TIN that I have applied for and will submit it within 15 days upon receipt.
    - ☐ I have not yet applied or do not have a U.S. TIN. Please explain why in the box below.

B Co-Investor Information (if applicable)

30. Name of Investor

Last Name

First Name

Middle Name

Other Legal Name

31. Permanent Home Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)]

32. Zip Code

33. Present Home Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)]

☐ Same as Permanent Home Address

34. Zip Code

35. Mobile Phone (country code, mobile no., e.g. +639123456789)

+

36. Birthdate (e.g. 08-AUG-2008) Day – Month – Year

37. Citizenship

38. Work Phone (country code, area code, & tel no., e.g. +6325558888)

+

39. Home Phone (country code, area code, & tel no., e.g. +6325558888)

+

40. Gender

☐ Male

☐ Female

41. Birthplace (City/Province/State and Country)

42. Preferred Mailing Address

☐ Permanent Home Address ☐ Work Address

☐ Present Home Address

43. E-mail Address

44. Occupation

45. Gross Annual Income

46. Name of Employer/Business

47. Nature of Work/Business

48. Work Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)]

49. Zip Code

50. SSS No. or GSIS No.

51. Philippine Tax Identification No. (TIN)

– –

52. ID Presented

53. ID No.

54. ID Expiry Date (e.g. 08-AUG-2008) Day – Month – Year

Compliance with the Foreign Account Tax Compliance Act (FATCA)

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**Please refer to https://www.irs.gov/individuals/international-taxpayers/substantial-presence-test for more information about "U.S. persons."*

55. 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).*

56. If you are a U.S. Person but do not have a U.S. TIN, please indicate the reason below:

☐ I am waiting for the U.S. TIN that I have applied for and will submit it within 15 days upon receipt.

☐ I have not yet applied or do not have a U.S. TIN. Please explain why in the box below.

C In-Trust-For (if opening an account for a minor)

57. Name of Minor

Last Name

First Name

Middle Name

58. Relationship to the Investor/Trustee

59. Birthplace (City/Province/State and Country)

60. Birthdate (e.g. 08-AUG-2008) Day – Month – Year

Note: 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

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.

61. Net Investible Assets
- ☐ PHP 1,000,000 and below
- ☐ PHP 1,000,001 - PHP 5,000,000
- ☐ PHP 5,000,001 - PHP 10,000,000
- ☐ Over PHP 10,000,000

62. Most Important Investment Goal
- ☐ Prepare for retirement
- ☐ Purchase a property
- ☐ Open a business
- ☐ Provide for education
- ☐ Grow your money
- ☐ Others, please specify

63. How familiar are you with investing?
- ☐ No experience at all
- ☐ Some experience (you have mutual funds, UITFs or VUL)
- ☐ A little experience (you have bank deposits)
- ☐ Advanced experience (you have direct investment in stocks/bonds)

64. You currently or used to have (please check all that apply):
- ☐ Life Insurance
- ☐ Pre-need Plan
- ☐ Mutual Funds
- ☐ Bank Deposits
- ☐ Bonds
- ☐ Stocks
- ☐ Own Business
- ☐ Real Estate Property
- ☐ Pooled Funds
- ☐ Others

To be answered by the Principal Investor only.
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
- [2] ☐ 6 - 10 years
- [3] ☐ 11 - 15 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
[ ]	3 to 6	Conservative
	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 representatives, employees, officers, directors, or successors-in-interest, will not be liable to you for any claims 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 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.**
**** Back-end load are charges to be paid by the investor at the time of redemption, based on the number of years invested.**

65. Fund Name (1)

Sales Load: ☐ Front-End Load* ☐ Back-End Load**

Amount Paid: ☐ PHP ☐ USD ___ , ___ , ___ , ___ . ___

Amount in Words:

Payment Details
- ☐ Cash
- ☐ Check (To be processed only upon receipt of cleared funds. To apply for the waived clearing privilege, fill out the Request for Waived Clearing by MF Representative form.)

Check No.:

Drawee Bank:

- ☐ Direct Deposit to SLAMCI Bank Account

Name of the Bank:

- ☐ Transfer from Sun Life Insurance Policy / Plan Agreement
- ☐ Telegraphic Transfer

66. Fund Name (2)

Sales Load: ☐ Front-End Load* ☐ Back-End Load**

Amount Paid: ☐ PHP ☐ USD ___ , ___ , ___ , ___ . ___

Amount in Words:

Payment Details
- ☐ Cash
- ☐ Check (To be processed only upon receipt of cleared funds. To apply for the waived clearing privilege, fill out the Request for Waived Clearing by MF Representative form.)

Check No.:

Drawee Bank:

- ☐ Direct Deposit to SLAMCI Bank Account

Name of the Bank:

- ☐ Transfer from Sun Life Insurance Policy / Plan Agreement
- ☐ Telegraphic Transfer

67. Source of Funds
- ☐ Existing investments in other instruments (time deposits, etc.)
- ☐ Income / bonus from employment
- ☐ Proceeds from sale of assets (real estate, etc.)
- ☐ Inheritance
- ☐ Matured pre-need plan / insurance policy
- ☐ Other sources, please specify:

F Reduced Sales Load Options

If you wish to avail of a lower sales load, select one (1) from the options below:

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

69. ☐ 0.5% Front-End Sales Load (If you wish to apply 0.5% front-end sales load, VAT exclusive)
You may apply for this privilege, if you intend to invest at least PHP 5,000,000 (except Money Market Fund and front-end zero load investments), within the next twelve (12) months, subject to SLAMCI's approval. You will need to submit an Application for Reduced Sales Load form.

G 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.

70. Have you, any of your co-investor(s), or any immediate relatives* (living or deceased) ever held or are currently holding an elected or appointed government position of this country or another? ☐ Yes ☐ 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.

71. 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:

72. Name (Last, First, M.I.) / Business Name	73. Relationship to the Investor	74. Occupation

75. Permanent Address [No., Street, Village/Subdivision, Barangay, City/Municipality, Province/State, Country (P.O. Box is not acceptable)]	76. Zip Code

77. Date of Signing (e.g. 08-AUG-2008) Day Month Year	78. Birthplace (City/Province/State and Country)	79. Philippine Tax Identification No. (TIN)
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80. Type of Entity (e.g. corporation/partnership, etc.)	81. Nature of Business	82. Date of Signing (e.g. 08-AUG-2008) Day Month Year	83. Country of Incorporation
		— —	

H Electronic Transactions

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

You may also email 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 12:00 noon 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.

I Terms and Conditions

Eligible Investor

Any person of legal age, regardless of citizenship or nationality, may hold shares of the Fund(s). Please direct any inquiries about the documents to be submitted and any other account-related matter/s to SLAMCI or its Mutual Fund Representatives.

Purchase Price

The principal amount of investment shall purchase the corresponding number of Fund shares at the applicable Net Asset Value Per Share (NAVPS), less any sales load and taxes. The end-of-day NAVPS 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, if issued, shall serve as proof of redemption. Shares of the Fund will be redeemed using the NAVPS 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 12:00 noon. If the request is received after 12:00 noon, the price will be the end-of-day NAVPS of the next business day. NAVPS 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.

I Terms and Conditions (Continuation)

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) days from the date of submission of this application. SLAMCI is authorized to 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
A stock certificate shall be issued upon a written request from the investor. Shareholders who do not elect to receive stock certificates 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 Prospectus of the Sun Life Prosperity Funds.

Compliance with Foreign Account Tax Compliance Act (FATCA)
You will inform us within thirty (30) calendar days of any change in your circumstances, including but not limited to citizenship, and submit the applicable documents accordingly.

You likewise acknowledge SLAMCI's statutory responsibility to provide your information, including but not limited to local or foreign tax status, to the appropriate authority.

Compliance with Data Privacy Act of 2012 (Republic Act No. 10173)
You acknowledge that SLAMCI, its employees, duly authorized representatives, related companies, third party service providers, and vendors shall process and share your information with any person or organization to (i) service this account, (ii) process transactions and enforce this contract, and (iii) pursue its legitimate and lawful rights and interests and other purposes allowed under privacy laws and regulations.

Your personal data shall be retained throughout the existence of your account(s) and/or until expiration of the retention limit set by laws and regulations from account closure and the period set for destruction or disposal of records. You certify that you have read, understood, and agreed with the declarations and authorizations above, including Sun Life's privacy policy found in https://apps.sunlife.com.ph/privacy.

J Investor's Acknowledgment and Agreement

You confirm that:

a. All information provided in this form are true, correct, and complete. All agreements made with SLAMCI are set out in this form. Please inform us immediately if any of the information provided has changed.
b. The funds where the investments come from are not from any of the unlawful activities listed in the Anti-Money Laundering Act (AMLA).
c. You have received, read, and understood the Funds' prospectuses, financial statements, policies, and these terms and conditions.
d. We can make adjustments to your account(s) to correct any error and modify or terminate any investor privilege. We can also close your account and charge a fee for not complying with laws and our policies.

84. Printed Name and Signature of Investor	85. Date of Signing (e.g. 08-AUG-2008) Day – Month – Year
86. Printed Name and Signature of Co-Investor	87. Date of Signing (e.g. 08-AUG-2008) Day – Month – Year

88. Would you like to receive personalized communications and product offers from SLAMCI, Sun Life of Canada (Philippines), Inc. (SLOCPI)?
☐ **Yes** ☐ **No**

K 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 performed the appropriate Know-Your-Investors (KYI) process based on the AMLA and Company policies, and you shall inform us immediately of your opinion about the investor's integrity/reputation.
c. You advised the investor(s) that transactions will only be processed upon submission of complete information, documentary requirements, and cleared funds.

89. Printed Name and Signature of MF Representative/Relationship Manager/Broker	90. A.R. No. Issued	91. Date of Signing (e.g. 08-AUG-2008) Day – Month – Year
92. Representative's Code	93. Branch	94. Lead Conversion Number

For Office Use Only

95. Date Received	96. Time Received	97. Receiving Department/Office
98. Remarks		