

Protect My Universe Ltd RBS
Office 12
Venture Wales Building
Pentrebach
Merthyr Tydfil
CF48 4DR



01120001000

Client reference number:
0000002371

16 December 2022

Dear Sirs

Protect My Universe Ltd RBS

We are writing because we need some additional documentation from you.

Anti-money laundering regulations require us to maintain up-to-date client information on an ongoing basis and where relevant obtain details of controllers and beneficial owners.

Please find enclosed a list of documents, which are required to verify your organisation based on the entity type. To help us meet our regulatory and legal requirements, please send us the stated item(s), along with the provided documentation slip, as soon as possible. We may contact you for further information.

If, however, your entity has been classified incorrectly, please contact us immediately so that we can amend our records accordingly and request alternative verification documents from you where necessary.

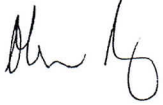
Anti-money laundering regulations prevent us from processing certain instructions, releasing withdrawal proceeds, or in some cases accepting contributions without having first verified the investor and any third parties registered against the account.

If you have not yet made an investment with us, to comply with data protection regulations we will remove your details from our records if you do not provide the requested documentation. Please refer to our data privacy notice for full details and timelines for data deletion.

We would like to thank you in advance for your co-operation.

If you have any questions, please contact our Vanguard Investments UK helpline on 0800 408 2065 quoting your reference number.

Yours faithfully



Ollie Rabley
Chief Operating Officer, Finance

Enclosure(s): Documentation return slip
 Corporate classification
 Documentation guidelines
 Beneficial owner & controller guidelines
 Beneficial owner & controller details
 Trust details form
 Letter of assurance



02120001000

Documentation return slip

Office use only: REVERIF

Please return this page with your documentation.

Client reference number: 0000002371

Client name: Protect My Universe Ltd RBS

Client address: Office 12
Venture Wales Building
Pentrebach
Merthyr Tydfil
CF48 4DR



03120001000

If certified, please arrange for the certifier to provide the following details:

Certifier name:	
Signature:	
Job title:	
Dated:	
Business telephone number:	
Business address:	



AML CORPORATE CLASSIFICATION

Client ID: 00502221

Please tick one of the following for the client: **Protect My Universe Ltd RBS**

Corporate: Please provide regulator (or relevant body) details and associated reference number for the below, where appropriate

Category	Tick	Regulator or body	Reference
Listed Public Company			
UK/EU/EEA Regulated Firm			
Non-UK/EU/EEA Regulated Firm			
Nominee - owned by a Regulated Parent			
Nominee - owned by a Non-regulated Parent			
UK/EU/EEA Distributor			
Non-UK/EU/EEA Distributor			
Platform			
Collective Investment Scheme/Fund of Funds			
Private Corporate Company			
Incorporated Registered Charity			
Unincorporated Registered Charity			
Unregistered Charity			



04120001000

Pension Scheme:

Category	Tick	Regulator or body	Reference
Regulated or Registered Occupational Pension Scheme			
Regulated or Registered Personal Pension Scheme			
Local Authority Pension Scheme			
Small Self-Administered Scheme (SSAS)			
Unregulated/Unregistered Pension Scheme			

Other:

Trust			
Sovereign Wealth Fund			
State Owned Entity			
Public Sector Body/Local Authority e.g. councils, state owned schools (other than registered charity or trust)			
Independent School/College/University (other than registered charity or trust)			
Lawyer/Accountant and others acting in professional capacity (non FCA Regulated)			
Non-listed Entity Subject to Statutory licensing			
UK Church or Place of Worship			
Parochial Church Council (other than registered charity or trust)			
Club or Society (other than registered charity or trust)			
Partnerships or Other Unincorporated Business			

DOCUMENTATION GUIDELINES FOR CORPORATE ENTITIES

Please provide certified copies of the documents shown below. Do not send originals of documents.

For UK/EU/EEA regulated companies, copies must be certified and dated by an authorised signatory or company secretary within the firm. For all other entities, copies must be certified and dated by an independent professional or regulated person subject to the anti-money laundering regulations and include the signature, name and position of the person signing. The certification must be dated within the last 6 months.



Listed Public Company

We require:

- ☐ Confirmation of Stock Exchange Listing
- ☐ Completed Wolfsberg Questionnaire dated within the last 12 months, where this is applicable
- ☐ Up-to-date Authorised Signatories list

UK/EU/EEA Regulated Firm

We require:

- ☐ Confirmation of regulator and reference number
- ☐ Completed Wolfsberg Questionnaire dated within the last 12 months
- ☐ Full List of Directors, Shareholders, Beneficial Owner(s) and Person(s) of Significant Control (PSC); including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Up-to-date structure chart, including ownership percentages
- ☐ Up-to-date Authorised Signatories list

Non-UK/EU/EEA Regulated Firm

We require:

- ☐ Confirmation of regulator and reference number
- ☐ Completed Wolfsberg Questionnaire dated within the last 12 months
- ☐ Certificate of Incorporation (or equivalent)
- ☐ Memorandum and Articles of Association (or equivalent)
- ☐ Full List of Directors, Shareholders, Beneficial Owner(s) and Person(s) of Significant Control (PSC); including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Up-to-date structure chart, including ownership percentages
- ☐ Up-to-date Authorised Signatories list

Nominee owned by a Regulated Firm

We require:

- ☐ Confirmation of regulated parent (please complete enclosed Letter of Assurance)
- ☐ Completed Wolfsberg Questionnaire dated within the last 12 months
- ☐ Full List of Directors, Shareholders, Beneficial Owner(s) and Person(s) of Significant Control (PSC); including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Up-to-date structure chart, including ownership percentages
- ☐ Up-to-date Authorised Signatories list

05120001000

Nominee owned by a Non-regulated Firm

We require:

- ☐ Certificate of Incorporation (or equivalent)
- ☐ Memorandum and Articles of Association (or equivalent)
- ☐ Confirmation of Senior Manager(s) responsible for operations
- ☐ Full List of Directors, Shareholders, Beneficial Owner(s) and Person(s) of Significant Control (PSC); including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Up-to-date structure chart, including ownership percentages
- ☐ Up-to-date Authorised Signatories list

Private Corporate Company

We require:

- ☐ Certificate of Incorporation (or equivalent)
- ☐ Memorandum and Articles of Association (or equivalent)
- ☐ Confirmation of Senior Manager(s) responsible for operations
- ☐ Full List of Directors, Shareholders, Beneficial Owner(s) and Person(s) of Significant Control (PSC); including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Up-to-date structure chart, including ownership percentages
- ☐ Up-to-date Authorised Signatories list

Incorporated Registered Charity

We require:

- ☐ Confirmation of the Charity's registration with relevant Charity Commission, including associated reference number
- ☐ Certificate of Incorporation (or equivalent)
- ☐ Memorandum and Articles of Association (or equivalent)
- ☐ Confirmation of Senior Manager(s) responsible for operations
- ☐ Full details of Directors/Trustee(s) and Person(s) of Significant Control; including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required. See Beneficial Owner and Controller Guidelines for more information
- ☐ Full details of the class of Beneficiaries
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Up-to-date Authorised Signatories list (if a Corporate Trustee or Director is appointed)

Unincorporated Registered Charity

Please note this will be registered in the name(s) of the Trustee(s), who will be verified in their own right.

We require:

- ☐ Confirmation of the Charity's registration with relevant Charity Commission, including associated reference number
- ☐ Extract of Trust Deed or latest Deed of Appointment/Retirement, or alternative documents establishing the Charity's legal status
- ☐ Full details of all Trustees; including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Full details of the class of Beneficiaries
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Up-to-date Authorised Signatories list (if a Corporate Trustee or Director is appointed)

Regulated or Registered Occupational Pension Scheme

Please note this will be registered in the name(s) of the Trustee(s), which will be verified in their own right.

We require:

- ☐ Full registered name and address of the Pension Scheme
- ☐ Full details of the Pension Administrator, including full registered name, address and regulatory reference/Companies House number – please note we may attempt electronic verification checks and request verification documents where required
- ☐ Where applicable, full details of the Corporate Trustee(s), including full registered name(s), address(es) and regulatory reference number(s) – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Where applicable, full details of the Individual Trustee(s), including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Confirmation of company (employer) name and registered address
- ☐ Evidence of HMRC or Pension Regulator registration, including PSTR reference, or Pension Scheme Incorporation Documents and Trust Deed (or latest Deed of Amendment)
- ☐ Up-to-date Authorised Signatories list



06120001000

Regulated or Registered Personal Pension Scheme

Please note this will be registered in the name(s) of the Trustee(s), which will be verified in their own right.

We require:

- ☐ Full registered name and address of the Pension Scheme
- ☐ Full details of the Pension Administrator, including full registered name, address and regulatory reference/Companies House number – please note we may attempt electronic verification checks and may also request verification documents where required
- ☐ Where applicable, full details of the Corporate Trustee(s), including full registered name(s), address(es) and regulatory reference number(s) – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Where applicable, full details of the Individual Trustee(s), including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Full details of the Pension's Beneficiary, including full name, residential address and date of birth – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Evidence of HMRC or Pension Regulator registration, including PSTR reference, or Pension Scheme Incorporation Documents and Trust Deed (or latest Deed of Amendment)
- ☐ Up-to-date Authorised Signatories list

Small Self-Administered Scheme (SSAS)

Please note this will be registered in the name(s) of the Trustee(s), who will be verified in their own right.

We require:

- ☐ Full registered name and address of the Pension Scheme
- ☐ Full details of each Trustee, including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Full details of the Pension's Beneficiary, including full name, residential address and date of birth – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Confirmation of company (employer) name and registered address
- ☐ Evidence of HMRC or Pension Regulator registration, including PSTR reference, or Pension Scheme Incorporation Documents and Trust Deed (or latest Deed of Amendment)
- ☐ Up-to-date Authorised Signatories list

Trust

Please note this will be registered in the name(s) of the Trustee(s), who will be verified in their own right.

We require:

- ☐ Full details of each Trustee, Settlor, Beneficiary, Protector and Controller (if applicable); including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required. We have provided a form in which these details can be provided
- ☐ Extract of Trust Deed which details the nature and purpose of the Trust and country of establishment and all Beneficial Owners detailed above (or latest Deed of Amendment)
- ☐ Excerpt of the Trust Register to evidence relevant registration (available from 2020)
- ☐ Up-to-date Authorised Signatories list for the Trustee (if a Corporate Trustee is appointed)

Partnerships/Other Unincorporated Business

Please note this will be registered in the name(s) of the Partner(s), who will be verified in their own right.

We require:

- ☐ Full details of each Partner/Business Owner; including full name, residential address and date of birth of each individual – please note we will attempt electronic verification checks and may also request verification documents where required
- ☐ Partnership Agreement
- ☐ Up-to-date Authorised Signatories list

All Other Corporate Entities not listed above

We require:

- ☐ Any incorporation/registration documents pertaining to the entity
- ☐ Full details of all Beneficial Owners; including full name, residential address and date of birth of each individual – please note we may attempt electronic verification checks and request verification documents where required
- ☐ Up-to-date Authorised Signatories list

BENEFICIAL OWNER AND CONTROLLER GUIDELINES

In the case of a body corporate, other than a company listed on a regulated market, the beneficial owner includes any individual who:

- exercises ultimate control over the management of the body corporate; or
- ultimately owns or controls (whether through direct or indirect ownership or control, including through bearer share holdings or by other means) more than 25% of the shares or voting rights in the body corporate; or
- otherwise controls the body corporate

For example, if no individual owns or controls more than 25% of the shares or voting rights in the body, firms should use judgement in determining whether an individual owning or controlling a lower percentage exercises effective control.

Guidance on the meaning of other forms of significant influence and control is available for companies: www.gov.uk/government/news/people-with-significant-control-psc-who-controls-your-company

For applicants who are body corporates or partnerships please provide details below of any natural person(s) that directly own or control more than 25% of the voting rights in the body or partnership or who own or are entitled to more than 25% of its capital or profits.

Should the applicant not be directly owned by a natural person(s), please send details of the ownership structure to us and upon receipt we will advise you of any further information that may be required from you.

Information provided will be validated accordingly and we may be required to obtain further details or documentation from you, depending on the information provided.



07120001000

Beneficial Owner and Controller Details (Individuals)

Name of account holder(s)

Client reference number (if known)



Name & Title:

Date of birth:

Capacity/ies*:

%

Name & Title:

Date of birth:

Capacity/ies*:

%

Permanent Residential Address:

Permanent Residential Address:

* e.g. Beneficiary, Partner, Shareholder, Director, PSC etc

Name & Title:

Date of birth:

Capacity/ies*:

%

Name & Title:

Date of birth:

Capacity/ies*:

%

Permanent Residential Address:

Permanent Residential Address:

* e.g. Beneficiary, Partner, Shareholder, Director, PSC etc

Please provide any additional information on a separate page.

Declaration

All beneficial owners and other associated parties are known to me/us and I/we undertake to make those named above aware that they may be subjected to the same data protection and money laundering verification provisions as outlined in the terms and conditions.

Applicant's Signature

Date

Applicant's Signature

Date

Beneficial Owner and Controller Details (Corporate Entities)

Name of account holder(s)

Client reference number (if known)



Corporate name:

Capacity/ies*:

Corporate name:

Capacity/ies*:

Business Address:

Business Address:

* e.g. Corporate Trustee, Director, etc

Corporate name:

Capacity/ies*:

Corporate name:

Capacity/ies*:

Business Address:

Business Address:

* e.g. Corporate Trustee, Director, etc

Please provide any additional information on a separate page.

Declaration

All beneficial owners and other associated parties are known to me/us and I/we undertake to make those named above aware that they may be subjected to the same data protection and money laundering verification provisions as outlined in the terms and conditions.

Applicant's Signature

Date

Applicant's Signature

Date

TRUST DETAILS

For applicants acting as Trustee(s) (or similar), please provide details of all Settlers (even if deceased), any further Trustees or others (including Protectors) that have any control over the management of the trust or arrangement, and any named individuals or classes that have a potential entitlement to 25% or more of the property of the trust assets (even where discretion exists).

Name of account holder(s) :		Client reference number (if known)					
Title & Full Name	Permanent Residential Address	Date of Birth	Capacity (tick as applicable) * :				
			Trustee	Settlor	Beneficiary	Protector	Controller



10120001000

**If the capacity of an individual has not been provided, please write clearly what capacity they hold within the organisation.*

If there are more individuals then please provide their details on a separate sheet of paper and enclose with this form. Please note that all of the details requested above will need to be stated clearly for each individual. Please also be aware that we will require an original or correctly certified copy of an Extract of the Trust Deed to complete our checks.

Declaration

All individuals named on this form are known to me/us and I/we undertake to make those named above aware that they may be subjected to the same data protection and money laundering verification provisions as outlined in the terms and conditions.

Applicant's Signature _____ Applicant's Signature _____
Date _____ Date _____

LETTER OF ASSURANCE GUIDELINES

Under UK Money Laundering Regulations we may be able to apply a simplified level of due diligence where certain requirements are met, such as dealing with a regulated entity.

Your organisation does not appear to be regulated, therefore please either:

1. Complete the enclosed form confirming the UK/EU/EEA regulated entity you are governed by and supply an organisation chart to enable us to apply simplified due diligence, or
2. If you are not governed by a UK/EU/EEA regulated entity, please provide supporting documentation that can be used to satisfy our anti-money laundering requirements. We may contact you for further information.



Please note that until we receive this information we will withhold any applicable repurchase proceeds. There may also be a delay in the acceptance of any further funds until our requirements have been satisfied.

11120001000

Client name:

Client reference number:

LETTER OF ASSURANCE



Full name of nominee / wholly owned subsidiary:

Registered Address of firm:

Full name of **regulated parent**:

Full address of **regulated parent**:

Regulators name (e.g. UK - FCA):

Regulators Reference Number:

Please ensure this form is signed by a Director or the MLRO of the parent company if in the UK, or an equivalent person if outside of the UK. By signing this you are confirming that the above nominee/ unregulated subsidiary firm is governed by your organisation for anti-money laundering purposes and subject to your policies and procedures. Also, that it is the subject of regular reviews and audits confirming that they apply anti-money laundering standards equivalent to the Joint Money Laundering Steering Group (in the UK) and/or 4th EU Anti-Money Laundering Directive, as amended from time to time, or equivalent legislation.

Completed By:

Signed _____ Name (PRINT) _____

Date _____ Position (PRINT) _____