

SUBSCRIPTION AGREEMENT

Blockchain Strategies Fund S.C.Sp

A special limited partnership (*société en commandite spéciale*)

Registered office: 30 boulevard Royal, L-2449 Luxembourg

R.C.S. Luxembourg - B219500

(the Partnership)

The present Subscription Agreement is submitted to a limited number of potential eligible investors on a confidential basis. The recipient undertakes that neither it nor any of its employees or advisers (as the case may be) shall use the information for any purpose other than for evaluating its future investment in Blockchain Strategies Fund S.C.Sp or divulge such information to any other party. This document shall not be photocopied, reproduced or distributed to others without the prior written consent of BLOCK ASSET MANAGEMENT S.à r.l., acting as the managing general partner (*associé gérant commandité*) of Blockchain Strategies Fund S.C.Sp.

FOR PRIVATE PERSON

Please complete this Subscription Agreement (the "**Subscription Agreement**") AND THE KYC FORM A in full using block capitals and black ink and sign it. We reserve the right not to process incomplete or unsigned applications. Your application is subject to the final acceptance of Block Asset Management S.à r.l. (the "**General Partner**"). Please return the duly signed form along with all the required identification documents by mail or by fax with the original to follow by mail with the mention "do not duplicate sent by fax on [date]" and without undue delay to:

BANQUE DE PATRIMOINES PRIVES, Registrar and Transfer Agency Service

P.O Box 30, L-2449 Luxembourg | Fax: + 352 26 73 79 33 | Tel. +352 27207935

E-mail: investorservices@creand.lu

THE INVESTOR (the "Investor") HEREBY AGREES TO BECOME A PARTY TO AND BE BOUND IN ALL RESPECTS BY THE PROVISIONS OF:

- The Limited Partnership Agreement of Blockchain Strategies Fund S.C.Sp (the "Partnership") as may be amended from time to time (the "**LPA**"), by signing forthwith the LPA;
- The Issuing Document of Blockchain Strategies Fund S.C.Sp dated August 2022 currently in force and as may be amended from time to time (the "**Issuing Document**");
- The present Subscription Agreement.

Subscription to Units in the Partnership

The Investor hereby commits to subscribe to Units

for a total amount equal to: _____ **EUR/USD**

THE INVESTOR HEREBY DECLARES AND ACKNOWLEDGES:

- To have received and read a copy of the LPA and of the Issuing Document;
- To have reviewed the LPA and the Issuing Document and to understand the risks of, and other considerations relating to, the purchase of Units as well as the investment objectives, policies and strategies of the Partnership;
- To consent to the content of the LPA and of the Using Document;
- To have received satisfactory answers and clarifications by duly authorized representatives of the Partnership on all questions raised by the Investor.
- That the General Partner, on behalf of the Partnership, has made available to the Investor all documents that it has requested relating to an investment in the Partnership;
- That, in evaluating the suitability of an investment in the Partnership, the Investor has not relied upon any representations or other information (whether oral or written) other than as contained in the foregoing documents or written answers to questions furnished to the Investor by the Partnership and the General Partner, and the Investor acknowledges that such information has not been supplemented to reflect significant changes in the structure and the terms of the investment (whether or not reflected in this Subscription Agreement).

1. APPLICANT DETAILS

Please complete the information listed below:

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
First name		Last name	
Residential Address ¹	Street/N°		
	City/Town		
	Post Code		
	Country		
Tel:		Fax:	
E-mail ²			
Nationality			
Date of birth		Place of birth (city and country)	

¹ This address will be the registered address for the purpose of the Partner's Register. Evidence of such address is requested. PO Boxes or 'care of' addresses are not accepted.

² **This Email address will be used to send you the notices of information and the convening notices to the general meetings of the Partnership.**

1.2 INDIVIDUAL - CO HOLDER

You are acting as either: 2nd Co-holder of the joint account³ **OR** 2nd Co-holder of the common account⁴

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
First name		Last name	
Residential Address ⁵	Street/N°		
	City/Town		
	Post Code		
	Country		
Tel:		Fax:	
E-mail			
Nationality			
Date of birth		Place of birth (city and country)	

2. INVESTMENT DETAILS

You may apply for Units in one or more classes of Units by completing the information below. By signing this Subscription Agreement, you irrevocably undertake to purchase the Units below in compliance with the terms and conditions of the Issuing Document:

Name of Partnership and Class	Class of Units	International security code (ISIN – common code)	Currency (ISO Code)	Invested Amount ⁶
BLOCKCHAIN STRATEGIES FUND SCSp	Class A Limited Units	LU1738364063	USD	
BLOCKCHAIN STRATEGIES FUND SCSp	Class B Limited Units	LU1738363925	EUR	
BLOCKCHAIN STRATEGIES FUND SCSp	Class C Limited Units	LU2521015862	USD	
BLOCKCHAIN STRATEGIES FUND SCSp	Class D Limited Units	LU2587354049	EUR	
BLOCKCHAIN STRATEGIES FUND SCSp	Class I Limited Units	LU2521015946	USD	
BLOCKCHAIN STRATEGIES FUND SCSp	Class J Limited Units	LU2587354122	EUR	

The invested amount represents your hard commitment and your total subscription in the relevant Class of Units within the Partnership.

³ Bank account in the name of two or more natural persons (account owners) for which all the account owners must sign the application form and any attached document.

⁴ Bank account in the name of two or more natural persons (account owners) for which one or more account owner(s) must sign the application form and any attached document.

⁵ This address will be the registered address for the purpose of the Partner's Register. Evidence of such address may be requested. PO Boxes or 'care of' addresses are not accepted.

⁶ Certain Classes of Units may impose **minimum subscription amount** – please refer to the Issuing Document as to the applicable minimum subscription amount.

PAYMENT INSTRUCTIONS

Please use the following bank account(s) details to transfer your subscription payment with reference to the Name of Partnership and Class of Units (if any) invested. Cleared funds should be received before the relevant Cut-Off Time (as defined in the Issuing Document). Payment of your investment must be drawn on a bank account opened in your own name. **No third party payments will be executed.** We reserve the right to not accept a payment executed by a credit institution not governed by AML laws equivalent to those of European laws.

IN EUR:

VIA TARGET II:

IBAN: LU75 3610 1179 3741 0101
Swift code: BBPPLULLXXX
Bank's Name: BANQUE DE PATRIMOINES
In favor of: Blockchain Strategies Fund S.C.Sp

VIA CORRESPONDENT BANK:

IBAN: LU75 3610 1179 3741 0101
Swift code: BBPPLULLXXX
Bank's Name : BANQUE DE PATRIMOINES PRIVES

Correspondent Bank:

Bank / City	Account	N° SWIFT code
Bank of New York, Frankfurt F/c Banque de Patrimoines Privés	DE37503303009949749710	IRVTDEFX BBPPLULL

IN USD:

IBAN: LU48 3610 1179 3741 0102
Swift code: BBPPLULLXXX
Bank's Name: BANQUE DE PATRIMOINES
In favor of: Blockchain Strategies Fund S.C.Sp

Correspondent Bank:

Bank / City	Account	N° SWIFT code
Bank of New York, NY F/c Banque de Patrimoines Privés	8901370924	IRVTUS3N BBPPLULL

3. TERMS&CONDITIONS

1. CORRESPONDENCE

The Investor hereby authorises Banque de Patrimoines Privés acting as registrar and transfer agent of the Partnership ("Registrar and Transfer Agent") to send by email or fax to the Investor the following documents: convening notices to general meetings, information notices, distribution notices, statements of account and any other documents deemed necessary by the Registrar and Transfer Agent and the Partnership, including, without limitation and information in connection with anti-money laundering inquiries and status.

The Investor acknowledges that email or facsimile is not a secure means of communication and recognises and fully accepts the associated risks pertaining to the sending of documents by the Registrar and Transfer Agent

via email or fax including, without limitation, loss of information, errors, misdelivery, mistransmission, delivery delays (including without limitation those resulting from the Registrar and Transfer Agent's systems, networks, processes or procedures), deletions in error (including without limitation those resulting from the Registrar and Transfer Agent's systems, networks, processes or procedures), and unwanted access by third parties (including without limitation viruses, falsification, forgery and misuse of data), for which the Registrar and Transfer Agent shall not be responsible.

The Investor hereby agrees and undertakes that it will be liable for all demands, claims, actions, proceedings, losses, damages or other liabilities and costs and expenses that may arise or which the Registrar and Transfer Agent may suffer in sending the appropriate document(s) to the addressee as designated by the Registrar and Transfer Agent. This authorisation shall continue in effect until the Investor informs the Registrar and Transfer Agent in writing that it wishes to revoke this authorisation.

The investor hereby authorises the Registrar and Transfer Agent and/or the Partnership to send correspondence by electronic mail or fax to any of the email address/es and/or fax numbers provided to the Registrar and Transfer Agent, and agrees that it may send the Investor communications via these means unless and until it receives written notice from the Investor withdrawing consent for the same.

2. EXCHANGE RATES AND FEES

The Investor hereby acknowledges that if subscription is made and paid in a currency different from the official denomination of the relevant Class (as and when available), such subscription will be processed at the applicable outstanding exchange rate and any applicable exchange fees and expenses will be charged to the Investor.

4. DECLARATIONS

Accuracy of information	<input type="checkbox"/> I certify that all the information provided in this document and in the declaration of beneficial owner is accurate and complete and undertake to immediately notify Banque de Patrimoines Privés if any of the information provided in this document changes (in particular if you have stated that you are an institutional investor and do not qualify as such anymore, change of name, contact, status, structure, ultimate economic beneficiaries...) and submit a new agreement within 30 days.
Subscription Agreement, Issuing Document and Limited Partnership Agreement	<input type="checkbox"/> I declare that I have read, agreed and understood the contents of this Subscription Agreement and that I have had the opportunity prior to completing this agreement to request and read the Issuing Document and Limited Partnership Agreement of the Partnership. I understand that the subscription for Units is made subject to the terms of such documents and the terms and conditions of this agreement (including the application notes).
Beneficial Owner	<input type="checkbox"/> I hereby confirm that the investment is made on the applicant's own behalf; <input type="checkbox"/> I hereby confirm that the investment is made in my name but on behalf of my clients and that I have identified and verified the identity of underlying clients and their ultimate economic beneficiaries as well as the origin of the money invested. None of such clients and ultimate economic beneficiaries is named on list of prohibited country, territories, entities and individuals maintained by the OFAC, the EU or my financial supervisory authority. <input type="checkbox"/> I am the ultimate economic beneficiary of the Units invested; or <input type="checkbox"/> I am not the ultimate economic beneficiary and I have provided the additional declaration to identify the ultimate economic beneficiaries

Capacity	<input type="checkbox"/> I declare that I have full legal capacity to subscribe in, hold and/or deal with the Units.
Non U.S. Person	<input type="checkbox"/> I hereby declare that Units are not acquired directly or indirectly or on behalf of a US Person as defined in the Issuing Document nor a corporation controlled by, or a majority of whose shares are held by, US Persons or by or on behalf of any person in any other jurisdiction that would be restricted or prohibited to acquire Units. <input type="checkbox"/> I acknowledge that the Partnership is not registered under the U.S. Securities Act of 1933 or other laws governing the U.S. Securities industry.
Transfer Restrictions	<input type="checkbox"/> I agree that the Units cannot be sold or transferred to or for the account of any US Person or in the USA or in or for the account of any person in any other jurisdiction that would be restricted or prohibited to acquire Units.
Origin of funds	<input type="checkbox"/> I confirm that the monies invested do not originate directly or indirectly from illegal or criminal activities and more generally do not contravene to applicable anti-money laundering laws and regulations.
Fax or other electronic transmission	<input type="checkbox"/> I agree that the Partnership and its agents (including Banque de Patrimoines Privés) is authorized to accept and execute any future instructions received by fax and/or electronic instruction without subsequent written confirmation and until written notice of the contrary, the applicant assuming all risks, e.g. those arising from an error in communication or comprehension as well as those arising from fraud and release the Partnership from any liability in that respect.
TAX Compliance	<input type="checkbox"/> I/We confirm that I/we did declare all revenues to the competent tax authorities and that the source of funds is not related to tax evasion in any other jurisdiction.
Eligible Investor	<input type="checkbox"/> I confirm to fulfill the criteria to qualify as an "eligible" investor as per the definition in the Issuing Document and the LPA.
KID	<input type="checkbox"/> I do declare to adhere to the status of professional investor according to the European Regulation N°1286/2014 of the European Parliament of the Council of 26 November 2014 on key information documents (KID) for packaged retail and insurance-based investment products (PRIIPs), published on 9 December 2014 in the Official Journal of the European Union.

5. REPRESENTATION AND WARRANTIES

We, the Investor hereby declare, confirm represent and warrant to, and agree with the General Partner (for itself and on behalf of the Partnership) as follows:

- 1) We are knowledgeable, sophisticated and experienced in business and financial matters; we fully understand and agreed with the limitations on Transfer described in the Issuing Document and the LPA; we are able to bear the economic risk of our investment in the Partnership for the duration of the Partnership, we are presently able to afford the complete loss of such investment and we are under no present or contemplated future need to dispose of any Units to satisfy any existing or contemplated undertaking, need or indebtedness; and we have been afforded access to information about the business and management of the Partnership sufficient to enable us to evaluate our investment in the Partnership.
- 2) We also represent and warrant that: (i) (if the Investor thereunder is not a natural person) the Person we act on behalf of is duly organized, validly existing and in good standing under the laws of the jurisdiction in which it is incorporated; (ii) we have all requisite power and authority to invest in the Partnership, as provided herein; (iii) such investment will not result in any material violation of or conflict with (x) any term of the charter or by-laws applicable or any other organisational document or (y) any instrument by which we are bound or any law or regulation applicable; (iv) such investment has been duly authorised by all necessary action on our behalf; and (v) this Subscription Agreement has

been duly executed and delivered on our behalf and constitutes our legal, valid and binding agreement enforceable against us in accordance with its terms, except as the enforcement thereof may be limited by bankruptcy, insolvency (including, without limitation, all laws relating to fraudulent transfers), reorganisation, moratorium or similar laws affecting enforcement of creditors' rights generally and except as enforcement thereof is subject to general principles of equity (regardless of whether enforcement is considered in a proceeding in equity or at law).

- 3) We are not the subject of any bankruptcy or insolvency proceedings, restructuring, receivership, liquidation, administration, proceedings for money laundering or any other proceedings having equivalent effects.
- 4) There are no material actions, proceedings or investigations pending or, to the best of our knowledge, threatened against ourselves or any of our affiliates or ultimate beneficial owner(s).
- 5) We are not relying on the Partnership and the General Partner or any company related thereto, or any of their partners, members, officers, counsels, agents or representatives for legal, investment or tax advice. We will seek independent legal, investment and tax advice to the extent necessary or appropriate in connection with our decision to commit to subscribe in the Partnership.
- 6) All written information which we have provided under this Subscription Agreement is correct and complete as of the date hereof and may be relied upon. Should there be any material change in such information prior to acceptance of this Subscription Agreement, we will immediately provide the Partnership with notice of such change.
- 7) We are aware that personal information given on this Subscription Agreement or otherwise in connection with the Commitment and details of our participation may be disclosed to the General Partner, any other companies affiliated to the General Partner and any delegate thereof, for the purpose of developing and processing the business relationship with us.

CONFIDENTIALITY

The Investor understands, agrees and acknowledges to the use and disclosure of all information relating to the Partnership, including all information contained in the Partnership Documents, this Subscription Agreement and any other Partnership's documentation as well as any reports and accounts (if any) received by the Investor relating to the Partnership notably in accordance with the provisions of the Issuing Document.

DATA PROTECTION

The Investor is hereby informed and expressly consents, by signing this document, to the processing of the data voluntarily provided in this document to, as well as of any data which might be provided, for the enforcement of the agreement or regarding a query, application, or the contracting of any service or product, even after the end of the contractual relation, to the Partnership, any member of the General Partner or its affiliates (the "**Group**").

The Partnership (or its General Partner) as data controller; and the Administration Agent; the Investment Manager; the Advisor; the Depositary and/or any of the Partnership's service providers or other third parties when required by law or regulation (Luxembourg or otherwise) as processors, will have access to those personal data provided.

This personal data shall be held on computer and processed by the Partnership, the General Partner or their agents or delegates (as set out in the respective service agreements if any).

Such data will be processed for the purposes of carrying out the services of the Partnership and the General Partner as prescribed by applicable laws such as maintaining the register of Shareholders of the Partnership and

providing financial and other information to Shareholders, and to comply with applicable legal obligations including client identification and tax reporting obligations.

- Please, **check this box** in case you accept the processing and communication of your personal data (as client's representative) by the Partnership, for the delivery of information and advertising on the Partnership products and services, or the various Group companies products and offers.

Only to the extent that you have accepted, the accepted purposes include the delivery of information and advertising, including via email, on offers, products, recommendations, services, promotional items, and customer loyalty campaigns of the Partnership and the various Group companies; data extraction and storage, and marketing surveys to adapt our commercial offers to your specific profile, and once the existing contractual relationship ends.

In order to adequately enforce the subscription agreement and be able to offer you services according to your needs, on the basis of the information provided, we will create different profiles based on your interests and needs and on the Group business strategy, and as a result automated decisions will be taken on the basis of these profiles.

The Partnership and the General Partner will take reasonable steps to ensure that all personal data in relation to Investors is recorded accurately and maintained in a secure and confidential format. Such personal data will be retained only as long as necessary or in accordance with applicable laws and will only be disclosed to such third parties and agents or delegates as may be permitted under applicable laws or, where appropriate, with the prior consent of the relevant Investors. This may include disclosure to third parties such as auditors and the regulators and to agents or delegates of the Partnership and the General Partner who process the data inter alia for anti-money laundering purposes, tax laws and regulations such as, but not limited to FATCA and common reporting standard ("CRS") on OECD and EU levels or for compliance with other Luxembourg legal or regulatory requirements.

Personal data may also be transferred and/or disclosed to any member of the General Partner or its affiliates. Transfers/disclosures will be made in such parties legitimate interest for the purposes of maintaining global client records and providing centralized administrative services and Shareholders' servicing also in countries, where the Partnership is offered to subscription or distributed. As part of the communications described in the previous paragraphs, international data transfers may be made to third parties or international organisations, whether there exists a European Commission decision on their adequacy or not. International transfers to countries that cannot guarantee an adequate protection level shall be made on an exceptional basis and will be made whenever they are necessary for the adequate development of the contractual relationship.

The Group has data protection clauses to adequately ensure the protection of your data as part of the communication and international transfer of your data in countries in which they can be applied.

Should the data provided pertain to physical persons other than the client, the latter guarantees that he/she has obtained and has their prior consent for the communication of their data and has informed them, prior to their inclusion in this document, of the purposes of the data processing, communications, and other terms established herein.

The Investor guarantees the accuracy and truthfulness of the personal data provided, undertaking to keep them duly updated and to notify any changes in them.

The personal data provided will be kept for the period established on the basis of these criteria: (i) legal obligation of conservation; (ii) term of the contractual relationship and service of any responsibilities derived from said relationship; and (iii) request of removal by the interested party in the applicable cases.

Under the terms and scope established in the regulations in force, any person is entitled to:

- confirm whether the Group is processing personal data that concern you, and access them and the information related to their processing.
- request the rectification of inaccurate data

- request the removal of data, among other reasons, when they are required for the purposes for which they were collected, in which case the Group will cease to process the data except for the filing of or defence against potential claims.
- request the limitation of the processing of your data, in which case they will only be processed with your consent, with the exception of their storage and use for the filing of and defence against claims or for the protection of the rights of another natural or legal person or for reasons of significant public interest in the European Union or in a certain Member State.
- object to the processing of your data, in which case, the Group shall cease to process your data, except for the defence against potential claims.
- receive, in a structured, widely-used format that can be mechanically read, the personal data that concern you and that you have provided to the Group or request that the Group transfer them directly to another controller when technically possible.
- withdraw the consent granted, if applicable, for the purpose above, without affecting the lawfulness of the processing based on consent prior to withdrawal.

The aforementioned rights of access, rectification, removal, limitation, objection, and transferability may be directly exercised by the data owner or its legal or voluntary representative, through a written communication sent to the Partnership or dataprotection@bbpp.lu.

The interested party may file a claim with the CNPD (National Commission for Data Protection) , particularly when it considers that it has not achieved satisfaction in the exercise of its rights, through the website provided for this purpose by the relevant Control Authority.

The Investor further acknowledges and accepts that the Partnership, the General Partner or the service providers (if applicable) will report any relevant information in relation to the Investor's investment in the Partnership to the Luxembourg tax authorities which will exchange this information on an automatic basis with the competent authorities in the United States or other permitted jurisdictions as agreed in the FATCA Law and the CRS Law, on OECD and EU levels or equivalent Luxembourg legislation.

The Investor expressly recognizes that the Partnership (or its General Partner or entities within the Group) will accept no liability with respect to any unauthorized third party receiving knowledge of or having access to such personal data, except in the case of negligence or misconduct by the Partnership (or its General Partner or entities within the Group or any of their partners, officer, director, employees or offices).

6. GOVERNING LAW

The validity, construction and performance of this Subscription Agreement will be governed by and construed in accordance with the laws of the Grand Duchy of Luxembourg.

The courts of the District of Luxembourg-City have exclusive jurisdiction to settle any dispute arising out of or in connection with this Subscription Agreement, including a dispute regarding the existence, validity or termination of this Subscription Agreement.

7. AML/KYC DOCUMENTS

Please complete the KYC Form A- attached to this Subscription Agreement and send it along with the documents you are required to provide in order to subscribe to Units, to **Banque de Patrimoines Privés**. Subscriptions may be accepted temporarily on the basis of the receipt of documents sent by fax but subject to the receipt by mail of the original signed Subscription Agreement and identification documents.

The Partnership reserves the right to reject any application in whole or in part in which event the application monies or any balance thereof will be passed to the applicant at his own risk within fourteen days of the rejection of the application.

Pursuant to the applicable Luxembourg laws and to the circulars of the Luxembourg competent supervisory authority, obligations have been outlined to prevent the use of undertakings for collective investment such as the Partnership for money laundering purposes. As a result of such provisions, the following identification documents are required to proceed to the subscription.

8. SIGNATURES

By signing hereunder, I expressly agree with all provisions mentioned in this Subscription Agreement:

Name / Denomination	Title	Date (dd/mm/yy)	Signature

ANNEX I - ATAD II QUESTIONNAIRE

This tax questionnaire should be answered by the limited partners (the "**Subscriber**") in Blockchain Strategies Fund S.C.Sp (the "**Fund**").

The purpose of this tax questionnaire is to allow the Fund to comply with the new anti-hybrid rules introduced in Luxembourg by the law of 20 December 2019 ("**ATAD Law**"). ATAD Law transposed the EU Directive 2017/952 of 29 May 2019 regarding hybrid mismatches with third countries (commonly known as "**ATAD II**").

If you are a Subscriber acting as nominee/distributor, please remit this tax questionnaire to your principals/clients. The latter should fill in the required information as if they were direct Subscribers in the Fund. If your principals / clients are legal entities, a tax questionnaire adapted to legal entities can be sent to you upon request.

1. Personal Information of the Subscriber

Name of the Subscriber	
Jurisdiction(s) of tax residence ⁷	
Identification number(s) in jurisdiction(s) of tax residence	
Amount of investment committed	
Name of distributor/ nominee (if any) ⁸	

2. Information on Associated Enterprises of the Subscriber

Please indicate any associated enterprises of yours investing directly or indirectly in the Fund. The concept of "*associated enterprise*" should be considered to include the following:

- an entity in which the Subscriber holds, directly or indirectly, an interest representing at least 25% of the voting rights, or 25% of the capital or is entitled to receive at least 25% of the profits of the entity;
- an individual or entity which holds, directly or indirectly, an interest representing at least 25% of the voting rights, or 25% of the capital of the Subscriber or is entitled to receive at least 25% of the profits of the Subscriber;
- an associated enterprise also means an entity that is part of the same consolidated group for financial accounting purposes as the Subscriber;
- an enterprise in which the Subscriber has a significant influence in the management or an enterprise that has a significant influence in the management of the Subscriber.

⁷ If you indicate more than one jurisdictions or if the jurisdiction of tax residence is different than the jurisdiction of establishment/ incorporation, please provide details.

⁸ If you are not investing via nominee/ distributor, please leave this box blank.

Name of associated enterprise	
Jurisdiction(s) of tax residence ⁹	
Identification number(s) in jurisdiction(s) of tax residence	

3. Acting together

Please confirm that you are not “acting together”¹⁰ with any other Subscriber in the Fund.

I am not acting together with other Subscribers	<input type="checkbox"/>
I am acting together with other Subscribers	<input type="checkbox"/>

If you indicated: “I am acting together with other Subscribers”, please provide the following information regarding the Subscribers with which you are “acting together”.

Name of “acting together” Subscriber	
Jurisdiction(s) of tax residence ¹¹	
Identification number in jurisdiction(s) of tax residence	

4. Tax Status of the Fund in the jurisdiction(s) of tax residence of the Subscriber:

Please indicate if the tax rules of the jurisdiction(s) of tax residence of the Subscriber consider the Fund (incorporated under the form of *Société en Commandite Spéciale* (S.C.Sp)) to be a tax transparent or disregarded entity^{12,13}:

TRUE	<input type="checkbox"/>
FALSE	<input type="checkbox"/>

⁹ If you indicate more than one jurisdictions or if the jurisdiction of tax residence is different than the jurisdiction of establishment/ incorporation, please provide details.

¹⁰ Also refer to Article 1(2)(A)(b) of ATAD 2.

¹¹ If you indicate more than one jurisdiction or if the jurisdiction of tax residence is different than the jurisdiction of establishment/ incorporation, please provide details.

¹² This applies where the income and expense of the Fund are treated as income and expenses of the Subscriber in the jurisdiction(s) of tax residence of the Subscriber.

¹³ This question is very important in order to allow the Subscriber to declare any return deriving from the Fund to the tax authorities of the jurisdiction of tax residence of the Subscriber.

5. Tax Status of the Subscriber in the jurisdiction of tax residence of the Subscriber:

Please indicate your tax status in your jurisdiction(s) of tax residence:

1. Subscriber is a regular tax payer	<input type="checkbox"/>
2. Subscriber is personally tax exempt	<input type="checkbox"/>

6. Tax treatment of the income realized by the Fund in the jurisdiction of residence of the Subscriber.

Please advise on the treatment of the income realized by the Fund in the jurisdiction(s) of tax residence of the Subscriber. Please provide a short explanation.

The income realized by the Fund is immediately included in the taxable basis of the Subscriber.	<input type="checkbox"/>
The income realized by the Fund is not immediately included in the taxable basis of the Subscriber.	<input type="checkbox"/>

Please indicate how the income realized by the Fund is treated in the jurisdiction(s) of residence of the Subscriber:

1. Subject to taxation under ordinary rules	<input type="checkbox"/>
2. Subject to a preferential tax regime	<input type="checkbox"/>
3. Tax exempt	<input type="checkbox"/>

If you checked the box 2 or 3, please briefly describe the applicable tax treatment of the income realized by the Fund.

7. Supporting Documentation

The Subscriber shall provide any additional information and supporting documentation confirming the positions taken in this Schedule (text of the law in your jurisdiction, administrative guidelines, jurisprudence, tax returns, tax certificates, tax opinions or similar documents), if and when requested by the Fund.

*
* *

The Subscriber declares that the information provided in this tax questionnaire is accurate and complete. The Subscriber shall send the Fund an updated tax questionnaire in the event that the answers to this tax questionnaire change.

Signed by _____
[NAME OF SUBSCRIBER]

Signature of SUBSCRIBER

KYC FORM A
IDENTIFICATION FOR INDIVIDUAL INVESTOR
E-mail: accountopeningta@bbpp.lu

Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
First name		Last name	
Residential Address ¹	Street/N°		
	City/Town		
	Post Code		
	Country		
Tel:		Fax:	
E-mail ²			
Nationality			
Date of birth		Place of birth (city and country)	
ID or passport	N°		
	Issued by		
	Issue Date		
	Expiration Date		
Politically Exposed Person	I declare that I am or I have been entrusted with prominent public functions (or to be closely connected to a politically exposed person): <input type="checkbox"/> Yes, please specify: _____ <input type="checkbox"/> No		

1.1. POWERS OF ATTORNEY (IF APPLICABLE)

We will need to receive a certified true copy of the ID of this person

This power of attorney authorizes Banque de Patrimoines Privés and the Fund to execute any future instructions received from the following person and for:

Transactions concerned	<input type="checkbox"/> all dealing instructions <input type="checkbox"/> subscriptions only <input type="checkbox"/> redemptions only <input type="checkbox"/> other (please specify): _____
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Title	<input type="checkbox"/> Mr <input type="checkbox"/> Mrs <input type="checkbox"/> Ms	Sex	<input type="checkbox"/> M <input type="checkbox"/> F
First name		Last name	

¹ This address will be the registered address for the purpose of the Share Register. Evidence of such address may be requested. PO Boxes or 'care of' addresses are not accepted. This Email address will be used to send you the convening notices to the general meetings of the Fund.

² This Email address will be used to send you the drawdown notices (if applicable) and the convening notices to the general meetings of the Fund.

Residential Address ³	Street/N°	
	City/Town	
	Post Code	
	Country	
Correspondence Address (if different)	Attn / Company	
	Street/N°	
	City/Town	
	Post Code	
	Country	
Tel:		Fax:
E-mail		
Nationality		
Date of birth		Place of birth (city and country)
ID or passport	N°	
	Issued by	
	Issue Date	
	Expiration Date	
Politically Exposed Person	I declare that I am or I have been entrusted with prominent public functions (or to be closely connected to a politically exposed person): <input type="checkbox"/> Yes, please specify: _____ <input type="checkbox"/> No	

1.2. CORRESPONDANCE

Please enter your preferred address for all correspondence (if different from the mailing address provided in Clause 1). P.O. Box can be accepted only if a residential address is provided in Clause 1. This address will be used to send you confirmation of your holding(s) in the Fund.

Correspondence Address	Attn / Company	
	Street/N°	
	City/Town	
	Post Code	
	Country	
Tel:		Fax:

1.3. BANK ACCOUNT DETAILS

Please provide your bank account details from **which the subscription amount will be transferred:**

³Evidence of such address may be requested. PO Boxes or 'care of' addresses are not accepted.

Account holder ⁴		
Bank's details	Bank's name	
	Street/N°	
	City/Town	
	Post Code	
	Country	
IBAN		
BIC/SWIFT Code		
National Code (e.g. BLZ, BC, Sort code)		
Account number		
Account currency		
Settlement Currency ⁵		

Please provide your bank account details below for the receipt of redemption proceeds, dividends or other payments you may be entitled to, **if different from the bank account mentioned in the previous §**

Account holder ⁶		
Bank's details	Bank's name	
	Street/N°	
	City/Town	
	Post Code	
	Country	
IBAN		
BIC/SWIFT Code		
National Code (e.g. BLZ, BC, Sort code)		
Account number		
Account currency		
Settlement Currency ⁵		

1.4. DIVIDENDS

Dividends (if applicable) should be:

- reinvested
 paid on the bank account provided in Clause 1.3.

1.5. REPORTING

Please specify to whom the following reporting should be sent:

⁴ The bank account must be in your name. **Payments to a third party other than the investor are not permitted.**

⁵ Payments will be made in the settlement currency for which **you may bear exchange rate expenses** if different from the reference currency of the Class of Shares (or Sub-Fund in the absence of Class of Shares) invested or from the currency selected by the Fund or from your bank account's currency.

⁶ The bank account must be in your name. **Payments to a third party other than the investor are not permitted.**

Contract note for each transaction	<input type="checkbox"/> to the applicant at his/her correspondence address <input type="checkbox"/> to a third party at the address below
Holding confirmation	<input type="checkbox"/> to the applicant at his/her correspondence address <input type="checkbox"/> to a third party at the address below On the following basis: <input type="checkbox"/> monthly <input type="checkbox"/> quarterly <input type="checkbox"/> yearly

The investor declares by ticking this box that he consents to receive reports (statements of holdings, contract notes, convening notices and drawdown notices, if applicable) by non-encrypted e-mail from BPP. He acknowledges that this information will be sent on a non-secured basis through the internet network and BPP will not be held responsible about potential interception of this information for harmful or fraudulent use.

The following e-mail address(es) should be used in that purpose:

@

*Third party details, **if applicable**:

Name of entity			
Relation with applicant			
Address	Street/N°		
	City/Town		
	Post Code		
	Country		
Contact person			
Tel:		Fax:	
E-mail			

By signing hereunder, I declare that:

- I have full legal capacity
- the funds invested do not come from a criminal or unlawful origin and in particular do not constitute the proceeds of money laundering;
- I acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process my personal data provided to fulfill this document, complying with Data Protection regulations and the CRS Law.
- I have been informed that Banque de Patrimoines Privés shall process my personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.
- all the information provided is true, correct and complete and undertake to provide a new declaration if any information becomes incorrect or changes, within 30 days, even if referring to a third person different from me, for which I have obtained the correspondent consent.

Name / Denomination	Title	Date (dd/mm/yy)	Signature

1.6. AML/KYC DOCUMENTS TO BE PROVIDED:

- passport or national identity card (certified as true copy by an ambassador, consulate, notary or local police)
- Permanent residence address : please provide a certified copy of one of the following documents : a certificate of residence or utility bill if ID cards do not bear recent address
- Source of wealth, **please provide a certified copy of the most appropriate document(s): portfolio , statement (from your bank or broker), notary act, income tax document,....**

All identification documents should be received in original.

SOURCE OF WEALTH DECLARATION

Occupation	<input type="checkbox"/> Employee <input type="checkbox"/> Student <input type="checkbox"/> Self-employed <input type="checkbox"/> Director / Partner / Management <input type="checkbox"/> Retired (please mention the information on your last position in the following boxes) <input type="checkbox"/> Other (please specify) _____	
Profession		
Job Title		
Business line / Field of activity		
Executed within a	<input type="checkbox"/> Public administration <input type="checkbox"/> Small/medium size company <input type="checkbox"/> Listed company <input type="checkbox"/> Multinational <input type="checkbox"/> Other (please specify) _____	
Employer		Employer country
Best estimate of annual regular income ⁷	<input type="checkbox"/> up to EUR 50,000 <input type="checkbox"/> up to EUR 100,000 <input type="checkbox"/> up to EUR 250,000 <input type="checkbox"/> up to EUR 500,000 <input type="checkbox"/> up to EUR 1,000,000 <input type="checkbox"/> more than EUR 1,000,000	
Best estimate of total assets ⁸	<input type="checkbox"/> up to EUR 100,000 <input type="checkbox"/> up to EUR 250,000 <input type="checkbox"/> up to EUR 500,000 <input type="checkbox"/> up to EUR 1,000,000 <input type="checkbox"/> up to EUR 5,000,000 <input type="checkbox"/> more than EUR 5,000,000	
Source of Funds	I confirm that investments made are with monies arising from (tick as applicable) <input type="checkbox"/> Savings <input type="checkbox"/> Investments/insurance policy <input type="checkbox"/> Employment Income <input type="checkbox"/> Sale of Real estate <input type="checkbox"/> Occupation&Business Activity <input type="checkbox"/> Inheritance <input type="checkbox"/> Other (please specify): _____	

⁷ includes without limitation income from professional occupation, retirement, pension benefits, investment income, lease or renting of real estate.

⁸ Estimation of the global wealth includes liquidities, investments, real estate, etc...

TAX INFORMATION

The Tax Regulations⁽⁹⁾ currently in force require to collect (via a specific self-certification) additional information from the investor, such as the tax residency, the tax classifications and the citizenship status. Further, as an Account Holder, you are legally required to complete and provide this tax form upon account opening.

In case of any questions regarding the Tax Regulations, please contact your tax adviser or your competent tax authorities.

Please complete all the appropriate sections below and in case of any change in circumstances, provide the updated self-certification including such changes within 30 (thirty) days following the said change of circumstances. You declare that the information provided is to the best of your knowledge and belief, accurate and complete.

INDIVIDUAL'S TAX RESIDENCE SELF-CERTIFICATION

Automatic Exchange of Information for the Common Reporting Standards (AEOI-CRS) under the Organisation for Economic Co-operation and Development (OECD)

Tax residency is required for AEOI-CRS purposes, so please indicate all countries in which you are resident for tax purposes and the associated Tax Identification Number (TIN). For further information on this regulation (e.g. the definitions), please go to the official portal:

<http://www.oecd.org/tax/automatic-exchange/>

Country(ies) of residence for tax purposes*

Tax Identification Numbers*

Or tick if TIN
unavailable

I certify that the Financial Account's holder is not a resident for tax purposes in a country other than the country indicated in section 1 above (tick the box).

Additional countries of residence for tax purposes (if any)

I certify that, in addition to the country indicated in above section, that I am also resident for tax purposes in the following countries and that the TIN attached to each additional country is shown below or that I have ticked the box to indicate that the TIN of one of these countries is unavailable (please use a separate sheet of paper if you are resident for tax purposes in more than three additional countries):

Country:* TIN:* or TIN unavailable:

Country:* TIN:* or TIN unavailable:

⁹ The term "Tax regulations" refers to regulations created to enable Automatic Exchange Of Information (AEOI). It is not limited but includes the Foreign Account Tax Compliance Act (FATCA) contained in the US Hire Act 2010 and the Common Reporting Standard (CRS) approved by the Organisation for Economic Co-operation and Development (OECD) Council on 15 July 2014 for automatic exchange of financial account information.

Statements and signature

I acknowledge that the information concerning my account(s) and the information contained in this KYC form will be sent to the Luxembourg tax authorities, for the purposes of compliance with CRS obligations exclusively.

I acknowledge that I have been informed that such information will also be automatically exchanged with the tax authorities of any Reportable Jurisdiction(s) in which I am resident for tax purposes.

I acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process my personal data provided to fulfill this document, in accordance with the law dated 2 August 2002 relating to the protection of individuals with regard to the processing of personal data (the “2002 Law”) and Regulation (EU) 2016/679 of the European Parliament and of the Council of 27 April 2016 on the protection of natural persons with regard to the processing of personal data and on the free movement of such data (“GDPR”) that, according to such regulations and the CRS Law, I have been informed that Banque de Patrimoines Privés shall process my personal data provided in this KYC form, only for the purpose of comply with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.

I undertake to inform the financial institution of any Change in Circumstances and to provide it with a new signed and dated valid self-certification, highlighting such Change in Circumstances, within 30 (thirty) days from such Change in Circumstances.

I certify that all the statements made in this form are accurate and complete, even if are referring to a third person different from me, for which I have obtained the correspondent consent.

Signature of the Account Holder:

Last name, first name*:

Date * _____

In case of Change in Circumstances, please highlight any information that has changed in the updated form communicated to us.

FOREIGN ACCOUNT TAX COMPLIANCE ACT (FATCA)

Complete the right section* (“I AM / WE ARE US PERSON” or “I AM / WE ARE NOT US PERSON”) and provide the appropriate documentation*. For further information on this regulation (e.g. definitions), please go to the official portal: <https://www.irs.gov/Businesses/Corporations/Foreign-Account-Tax-Compliance-Act-FATCA>

- I AM / WE ARE US PERSON for the purposes of the American tax law (link with the US, e.g.: professional, Green card, residence, nationality, long stay, taxation with spouse considered “US Person”)** (For joint accounts, each subscriber shall provide the relevant confirmation)

We undertake to provide BPP Bank Luxembourg a **W9 Form duly filled and electronically signed** in accordance with the principles of the US Tax laws. <https://www.irs.gov/pub/irs-pdf/fw9.pdf>

- I AM / WE ARE NOT US PERSON for the purposes of the American tax law (link with the US, e.g.: professional, Green card, residence, nationality, long stay, taxation with spouse considered “US Person”)** (For joint accounts, each subscriber shall provide the relevant confirmation)

We undertake to provide BPP Bank Luxembourg a **W8BEN Form duly filled and electronically signed** in accordance with the principles of the US Tax laws. <https://www.irs.gov/pub/irs-pdf/fw8ben.pdf>

Specific FATCA conditions could be found in the prospectus of the funds.

The account opening and subscriptions are not authorized if you do not provide the above mentioned FATCA documentation or the other tax information.

I acknowledge that the information (i.e. contained in this account opening form and especially in this tax form and all other required tax information such as the account balance, the amount of revenue and sale proceeds paid or credited to the Financial Account) may be reported to the competent tax authorities, if required.

*As an Account holder or authorized signatory (provide the certified copy of the power of attorney), I hereby sign the tax information form:

By signing hereunder, I declare that:

- I have full legal capacity.
- I acknowledge that Banque de Patrimoines Privés, acting as data controller, shall process my personal data provided to fulfill this document, complying with Data Protection regulations and the CRS Law.
- I have been informed that Banque de Patrimoines Privés shall process my personal data provided in this KYC form, only for the purpose of complying with legal obligations in regards of Anti-Money Laundering and Terrorism Financing.
- All the information provided is true, correct and complete and undertake to provide a new declaration if any information becomes incorrect or changes, within 30 days, even if are referring to a third person different from me, for which I have obtained the correspondent consent..

Name / Denomination	Title	Date (dd/mm/yy)	Signature

IDENTIFICATION OF THE POLITICALLY EXPOSED PERSON(S) (“PEP”)

Tick this box if one of the people mentioned on this form is a “Politically Exposed Person” (PEP)

Name and first name	Status (refer to “a-b-c” categories as described in the Glossary)	Mandate

CONTACT PERSON WHO IS FAMILIAR WITH THE BENEFICIAL OWNER(S) V. WITH THE BENEFICIAL OWNER(S)

Depending on the answers provided on this form, we may contact you for further information concerning your Beneficial Owner(s)

Name and first name	Telephone number	E-mail Address

BLOCKCHAIN STRATEGIES FUND SCSP
FORM OF REVERSE SOLICITATION LETTER

Blockchain Strategies Fund SCSP 30 Blvd Royal
L-2449 Luxembourg
Luxembourg

Dear Sirs:

The undersigned (the "Investor") hereby confirms that the initial approach regarding Blockchain Strategies Fund SCSP (the "Fund"), and the possibility of the Investor becoming an investor in the Fund, was made by the Investor to Block Asset Management Sàrl ("BAM").

The Investor further confirms that:

1. it requested, at its own initiative and freely, that BAM provide the Investor with marketing materials related to the Fund;
2. that request was not prompted or initiated by BAM or any other person acting on its behalf;
3. all correspondence, communications and marketing activities regarding the Fund as between BAM and/or the Fund on the one hand, and the Investor on the other hand, have been and will

be at the initiative of the Investor; and

4. it has made its own independent assessment and/or taken independent advice in relation to providing this letter, and understands that, since any marketing of the Fund to the Investor has been and will be at the Investor's initiative, the Investor may not benefit from any protections or regulations that may otherwise have been available and/or applied had the Fund been marketed at the initiative of BAM.

Yours sincerely,

Name: _____

Date: _____

Certificate of Foreign Status of Beneficial Owner for United States Tax Withholding and Reporting (Individuals)

(Rev. October 2021)

► For use by individuals. Entities must use Form W-8BEN-E.

OMB No. 1545-1621

Department of the Treasury
Internal Revenue Service

► Go to www.irs.gov/FormW8BEN for instructions and the latest information.

► Give this form to the withholding agent or payer. Do not send to the IRS.

Do NOT use this form if:

Instead, use Form:

- You are NOT an individual W-8BEN-E
- You are a U.S. citizen or other U.S. person, including a resident alien individual W-9
- You are a beneficial owner claiming that income is effectively connected with the conduct of trade or business within the United States (other than personal services) W-8ECI
- You are a beneficial owner who is receiving compensation for personal services performed in the United States 8233 or W-4
- You are a person acting as an intermediary W-8IMY

Note: If you are resident in a FATCA partner jurisdiction (that is, a Model 1 IGA jurisdiction with reciprocity), certain tax account information may be provided to your jurisdiction of residence.

Part I Identification of Beneficial Owner (see instructions)

1 Name of individual who is the beneficial owner		2 Country of citizenship
3 Permanent residence address (street, apt. or suite no., or rural route). Do not use a P.O. box or in-care-of address.		
City or town, state or province. Include postal code where appropriate.		Country
4 Mailing address (if different from above)		
City or town, state or province. Include postal code where appropriate.		Country
5 U.S. taxpayer identification number (SSN or ITIN), if required (see instructions)		
6a Foreign tax identifying number (see instructions)	6b Check if FTIN not legally required <input type="checkbox"/>	
7 Reference number(s) (see instructions)	8 Date of birth (MM-DD-YYYY) (see instructions)	

Part II Claim of Tax Treaty Benefits (for chapter 3 purposes only) (see instructions)

9 I certify that the beneficial owner is a resident of _____ within the meaning of the income tax treaty between the United States and that country.

10 Special rates and conditions (if applicable—see instructions): The beneficial owner is claiming the provisions of Article and paragraph _____ of the treaty identified on line 9 above to claim a _____ % rate of withholding on (specify type of income): _____.

Explain the additional conditions in the Article and paragraph the beneficial owner meets to be eligible for the rate of withholding: _____

Part III Certification

Under penalties of perjury, I declare that I have examined the information on this form and to the best of my knowledge and belief it is true, correct, and complete. I further certify under penalties of perjury that:

- I am the individual that is the beneficial owner (or am authorized to sign for the individual that is the beneficial owner) of all the income or proceeds to which this form relates or am using this form to document myself for chapter 4 purposes;
- The person named on line 1 of this form is not a U.S. person;
- This form relates to:
 - (a) income not effectively connected with the conduct of a trade or business in the United States;
 - (b) income effectively connected with the conduct of a trade or business in the United States but is not subject to tax under an applicable income tax treaty;
 - (c) the partner's share of a partnership's effectively connected taxable income; or
 - (d) the partner's amount realized from the transfer of a partnership interest subject to withholding under section 1446(f);
- The person named on line 1 of this form is a resident of the treaty country listed on line 9 of the form (if any) within the meaning of the income tax treaty between the United States and that country; and
- For broker transactions or barter exchanges, the beneficial owner is an exempt foreign person as defined in the instructions.

Furthermore, I authorize this form to be provided to any withholding agent that has control, receipt, or custody of the income of which I am the beneficial owner or any withholding agent that can disburse or make payments of the income of which I am the beneficial owner. **I agree that I will submit a new form within 30 days if any certification made on this form becomes incorrect.**

Sign Here I certify that I have the capacity to sign for the person identified on line 1 of this form.

_____ Signature of beneficial owner (or individual authorized to sign for beneficial owner)	_____ Date (MM-DD-YYYY)
_____ Print name of signer	