

Notes to assist the completion of the AIFMD NPPR Marketing Notification Form for Full-scope Gibraltar AIFMs (AIFMs) marketing funds under Regulation 57 of the Alternative Investment Fund Managers Regulations 2013 (as amended) (the UK AIFM Regulations).

The form is divided into three sections.

Completion of Sections 1 & 3 depends upon the purpose of the notification. Section 2 **MUST** always be completed and the notification will not be considered valid and will not be processed.

- Section 1 – Alternative Investment Fund Manager Details
- Section 2 – Fund Details
- Section 3 - Declaration

The completed form should be submitted to Nppr57new@fca.org.uk

The subject line of the email should contain your FRN (if known) and Firm Names followed by the words 'AIFMD NPPR Marketing Notification.

If you have any queries about submitting your data, please send them to: firm.queries@fca.org.uk

Key and Instructions for Completing the Form

Key

- (1) *Mandatory Fields*
- (2) *If the **AIFM** is already registered with or authorised by the FCA then the FRN must be supplied, otherwise the AIFM National Code must be supplied.*
- (3) *Mandatory if the firm is not registered with the FCA*
- (4) *Mandatory unless the AIF ID Code type is not applicable*
- (5) *Mandatory if the AIF is a third country feeder AIF*
- (6) *Mandatory if the Structure is Sub Fund*
- (7) *Mandatory unless the Umbrella ID Code type is NOT applicable.*

If you are submitting multiple notifications, copy and paste contained within the form.

Section 1: AIFM Details

Information Required	Description
Legal Name (1)	The full legal name of the AIFM as given in its incorporating documents or as modified thereafter
Is the firm already authorised by or registered with the FCA? (1)	Enter yes or no
National Code	Unique firm identifier issued to the applicant AIFM by their national competent authority. Unregulated firms, please provide an alternative unique identifier. Note: This is for third country AIFMs.
FRN (2)	Firm Reference Number issued by FCA if applicable.
Home State (1)	The name of the country where the AIFM is domiciled.
Statutory Authority (1)	Statutory authority of the AIFM.

Principal Place of Business

Information Required	Description
Address (1)	Registered address
Post Code	Enter if relevant
Country (3)	Country where the AIFM registered office is based.
Email (3)	Email address of the registered office.
Phone number (3)	Contact telephone number for the registered office including Country Code.

Contact Details

Information Required	Description
-----------------------------	--------------------

First Name (1)	First name(s) of the individual to be contacted regarding the notification form. The contact provided should be someone from the AIFM
Surname (1)	Surname of the individual to be contacted regarding the notification form. The contact provided should be someone from the AIFM.
Address (1)	Applicant's contact address
City (1)	Applicant's contact address
Post Code	Enter if relevant
Country (1)	The name of the country where the applicant is based.
Email (1)	Applicant's email address.
Phone Number (1)	Applicant's telephone number including Country Code.

Invoice Details (Only need to complete if different from Principal Place of Business)	
Information Required	Description
Address (1)	If different from AIFM Principal Place of Business address
City (1)	If different from AIFM Principal Place of Business address
Post Code	If different from AIFM Principal Place of Business address
Country (1)	If different from AIFM Principal Place of Business address
Email (1)	If different from AIFM Principal Place of Business information.

Phone Number (1)	If different from AIFM Principal Place of Business information.
------------------	---

Fund Details	
Information Required	Description
AIF legal name (1)	Full legal name of the AIF.
Identification Code (4)	Product Reference Number (PRN) issued by FCA, if applicable. Otherwise, please provide AIFM's own identification or reference number for the AIF.
AIF ID Code Type (1)	Type of ID code used as a reference for the AIF, options might include: <ul style="list-style-type: none"> - PRN - AIF - ISIN Code - AIF National Code - AIF LEI Code - AIF CUSIP Code - AIF SEDOL Code - AIF Bloomberg Code - AIF Reuters Code - AIF ECB Code - Not applicable
Structure (1)	If the AIF takes the form of an umbrella and you are notifying the marketing of one or more sub-funds, please enter 'Sub-fund' and complete the next three fields with the umbrella details. If the AIF does not have an umbrella structure, please enter 'Standalone AIF'.
Umbrella Legal Name (6)	The name of the umbrella fund to which sub-fund belongs to.
Umbrella Identification Code (7)	Product Reference Number (UK PRN) issued by FCA, if applicable. Otherwise, please provide AIFM's own identification or reference number for the umbrella AIF.
Umbrella ID Code Type (6)	Type of ID code used as a reference for the AIF
AIF primary statutory authority (1)	The primary statutory authority of the AIF

Legal name of the Master AIF (5)	The name of the master AIF of the feeder AIF. Field is mandatory if the AIF is an EEA feeder AIF.
Master AIF primary statutory authority (5)	Primary statutory authority of the master AIF, if the AIF is a feeder AIF
Domicile of the AIFM of the master AIF (5)	The name of the country where the AIFM of the master AIF is domiciled.
Domicile (1)	The name of the country where the AIF is domiciled
Is the AIF a third country feeder AIF? (1)	Provide Yes or No response. (Feeder AIFs are required to provide further information on the Master AIFs).
Domicile of the master AIF (5)	The name of the Country where the Master AIF is domiciled.
Legal name of the AIFM of the master AIF (5)	The name of the master AIF of the feeder AIF. Field is mandatory if the AIF is a third country feeder AIF.

Primary Safe Keeping Entity/Entities (Up to two)

Information Required	Description
Name of primary safe keeping entity/entities (up to two) (1)	Identity of the entity performing safekeeping functions. Up to two can be listed
Safe keeping domicile	Name of the country where the entity performing cash monitoring functions is domiciled.
Safekeeping entity FRN	FRN issued by FCA if this is available

Primary Cash Monitoring Entity/Entities (up to two)

Information Required	Description
Name of primary cash monitoring entity/entities (up to two)	Identity of the entity performing cash monitoring functions. Up to two can be listed
Cash monitoring domicile	Name of the country where the entity performing cash monitoring functions is domiciled.
Cash monitoring entity FRN	FRN issued by FCA if this is available

Primary Overseeing Entity/Entities (up to two)	
Information Requiring Change	Description
Name of primary overseeing entity/entities (up to two)	Identity of the entity performing oversight functions. Up to two can be listed
Primary overseeing domicile	Name of the country where the entity performing oversight functions is domiciled.
Primary overseeing entity FRN	FRN issued by FCA if this is available

Section 2 - Fund Details Contd	
Information Requiring Change	Description
Is any of the portfolio or risk management carried on by another entity?	Provide a Yes or No response.
Does the AIF have an independent transfer agent?	Provide a Yes or No response.
Does the AIF use independent auditors?	Provide a Yes or No response.
Does the AIF have an independent valuation agent?	Provide a Yes or No response.
Does the AIF use any prime brokers?	Provide a Yes or No response.
Names of other entities marketing the AIF in the UK?	As described

Section 3 - Declaration	
Information Requiring Change	Description
Signature (1)	Enter "yes". Note: If not providing an electronic signature and you are scanning the form and attaching to an email. Please also send a copy of the completed word document.
Name (1)	Name of the individual who is submitting the form.
Position (1)	Job title of the individual who is submitting the form
Date (1)	Date the form was signed.