
REDEMPTION REQUEST FORM

Alpine Multiple Opportunities Fund

A Sub-Fund of

Alpine Fund SICAV plc

This Form duly completed, should be sent by fax, with the original to follow by mail or courier to:

Alpine Fund SICAV plc – Alpine Multiple Opportunities Fund

Nu Bis Centre,
Mosta Road,
Lija LJA9012,
Malta

Telephone: +356 2576 2121

Email: investorservices@fexservfunds.com

Dear Sirs,

The undersigned hereby requests redemption of Shares of Alpine Multiple Opportunities Fund (“Sub-Fund”) set forth below in Alpine Fund SICAV plc (the “Company”) on the terms and subject to the conditions of the Offering Memorandum of the Fund dated 16th September 2022, as amended or supplemented from time to time (the “Memorandum”), and the Memorandum and Articles of Association of the Company with a Net Asset Value (as described in the Memorandum) equal to the amount indicated below, or the number of Shares indicated below held by the undersigned at a Redemption Price equal to the Net Asset Value (as described in the Memorandum) of such Shares on the relevant Redemption Day, Capitalised terms, unless otherwise defined herein, have the same meanings as in the Offering Memorandum.

Name of Investor / Duly Authorised Agent / Nominee (strike out as applicable):

Address Line 1: _____

Address Line 2: _____

City: _____ Country: _____

Postcode: _____ Telephone: _____ Email: _____

An investor of record in the sub-fund with account number: _____

Name of Fund: Alpine Multiple Opportunities Fund

Redemption Amount in EUR: _____

Or

Number of Shares requested to be redeemed: _____

Redemption Share Class: _____ ISIN: _____

Payment Instructions:

The Fund shall transfer the applicable redemption proceeds to the investor's bank account as indicated below within such time as may be indicated in the Offering Supplement.

Name on Bank Account: _____

Bank Name: _____

Bank Account Number: _____

IBAN Number: _____

SWIFT: _____

I/we agree that transfer charges are to be borne by the investor

Notes:

- (i) *The Redemption Notice Deadline is the cut off time by which completed Redemption Notices must be received by the office of the Administrator, which is close of business of the relevant Valuation Day.*
- (ii) *Redemption day is every Business Day.*

2. I/we (either in my individual capacity or as an authorised representative of an entity, if applicable) hereby represent and warrant that:

- a) I am the true, lawful and beneficial owner or registered holder, as the case may be, of the Shares to which this Redemption Request relates;
- b) I have full power and authority to request redemption of such Shares;
- c) I have full lawful power and authority, as a duly authorised officer or representative of

_____ [name of corporation, etc] to request redemption of such Shares;

- d) Such Shares are not subject to any pledge or otherwise encumbered in any fashion.

3. In the addition to the above, by execution and delivery of this Redemption Request, the undersigned reaffirms as of the date of this Redemption Request the representations, warranties, covenants and information contained in the original Application Form in respect of its initial investment in Shares.

Please complete the following information in block letters. Name(s) and signature(s) must be identical to the name(s) in which the Shares are registered.

Signature(s) of Subscriber(s)

Name(s) of Subscriber(s) in full and title

Notes:

- (a) *To be valid, this Redemption Request must be signed by each registered holder of the Shares to be redeemed. If the Redemption Request is signed under power of attorney, such power of attorney or a duly certified copy thereof must accompany this Redemption Request.*
- (b) *Notwithstanding the foregoing, as set forth in the Shareholder's Application Form for Shares, and in order to comply with the anti-money laundering regulations applicable to the Fund and the Administrator, the Shareholder acknowledges that any redemption proceeds paid to the Shareholder will be paid to the same account from which the Shareholder's investment in the Fund was originally remitted, unless the Fund, in its sole discretion, agrees otherwise.*
- (c) *If the Shareholder was exempted from the provision of full verification evidence at the time of the original subscription, due to payment being made from an account held in the Subscribers name at a financial institution based in a country which is recognized as having an adequate anti-money laundering regime, additional Subscriber verification evidence may be required before redemption proceeds can be made.*
- (d) *The Shareholder acknowledges that redemption proceeds will not be made until such time that the Administrator or the Fund is satisfied that verification of the identity of the Shareholder and the payment instructions for redemptions, is satisfactory.*
- (e) *Redemption requests may be made by mail or fax. An executed copy of the Redemption Form should be sent to the Administrator, at the address provided above, if sent via facsimile the original should be sent via overnight mail or courier. Although redemption requests may be sent by fax, Shareholders should be aware of the risks associated with sending documents in this manner. The Administrator will not be responsible in the event any Redemption Request sent is not received.*

Mailing Instructions

A scanned copy of this redemption form and all enclosures are to be emailed to the Administrator followed by the originals by mail:

Mail: Fexserv Fund Services Limited
Nu Bis Centre,
Mosta Road,
Lija, LJA 9012,
Malta

Tel.: +356 2576 2121

Email: investorservices@fexservfunds.com