OFFER FOR SUBSCRIPTION APPLICATION FORM

Please send this completed form by post or by hand (during normal business hours) to JTC Registrars (UK) Limited, The Scalpel, 18th Floor, 52 Lime Street, London, EC3M 7AF, United Kingdom so as to be received no later than 11.00 a.m. (London time) on 23 October 2020. Scanned copies emailed to: registrars@jtcgroup.com will be accepted in advance of originals by post.

The Directors may, with the prior approval of Shore Capital, alter such date and thereby shorten or lengthen the offer period. In the event that the offer period is altered, the Company will notify investors of such change.

Important: Before completing this form, you should read the Prospectus dated 30 September 2020 and the Terms and Conditions of Application under the Offer for Subscription set out in the Prospectus and accompanying notes to this form.

To: Buffettology Smaller Companies Investment Trust PLC and the Receiving Agent

| FOR OFFICIAL USE ONLY |
|-----------------------|
| Log No. |
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| |

Box 1 (minimum of £1,000 and in multiples of £100 thereafter)

1. APPLICATION

I/We the person(s) detailed in section 2A below offer to subscribe the amount shown in Box 1 (above) for Ordinary Shares subject to the Terms and Conditions of Application under the Offer for Subscription set out in the Prospectus dated 30 September 2020 and subject to the articles of association of the Company in force from time-to-time.

2A. DETAILS OF HOLDER(S) IN WHOSE NAME(S) ORDINARY SHARES WILL BE ISSUED (BLOCK CAPITALS)

| 1: | Mr, Mrs, Ms or Title: | Forenames (in full): | | | | | | |
|----------|-----------------------|-----------------------|--|--|--|--|--|--|
| | | | | | | | | |
| Sur | Surname/Company name: | | | | | | | |
| Add | Address (in full): | | | | | | | |
| Postcode | | Designation (if any): | | | | | | |
| | | | | | | | | |
| 2 | Mr, Mrs, Ms or Title: | Forenames (in full): | | | | | | |
| | | | | | | | | |
| Sur | Surname/Company name: | | | | | | | |
| | | | | | | | | |
| Add | Address (in full): | | | | | | | |
| | | | | | | | | |
| Postcode | | Designation (if any): | | | | | | |

| 3 | Mr, Mrs, Ms or Title: | Forenames (in full): | | | | | | |
|-----|-----------------------|-----------------------|--|--|--|--|--|--|
| Sur | Surname/Company name: | | | | | | | |
| Add | Address (in full): | | | | | | | |
| Pos | etcode | Designation (if any): | | | | | | |
| 4 | Mr, Mrs, Ms or Title: | Forenames (in full): | | | | | | |
| Sur | Surname/Company name: | | | | | | | |
| Add | Address (in full): | | | | | | | |
| Pos | stcode | Designation (if any): | | | | | | |

2B. CREST ACCOUNT DETAILS INTO WHICH ORDINARY SHARES ARE TO BE DEPOSITED (IF APPLICABLE)

Only complete this section if Ordinary Shares allotted are to be deposited in a CREST Account which must be in the same name as the holder(s) given in Section 2A.

| (BLOCK CAPITALS) | | | | | | | | | | | |
|--|--------------------|------------------|---------------------|----------|------------|---------|-----------|--|--|--|--|
| CREST Participant ID: | | | | | | | | | | | |
| CREST Member Account ID: | | | | | | | | | | | |
| 3. SIGNATURE(S): ALL HOLDE | ERS MI | IIST SI | IGN | | | | | | | | |
| By completing box 3 below you ar conditions in Part 11 (<i>Terms and Cor</i> and to have given the warranties, re | e deem nditions | ned to of App | have re lication | under th | ne Offer t | or Subs | cription) | | | | |
| First Applicant Signature: | | | | | | Dat | e: | | | | |
| Second Applicant Signature: | | | | | | Dat | e: | | | | |
| Third Applicant Signature: | | | | | | Dat | e: | | | | |
| Fourth Applicant Signature: | | | | | | Dat | Date: | | | | |
| Execution by a Company | | | | | | | | | | | |
| Executed by (Name of Company): | | | | | | Dat | e: | | | | |
| Name of Director: | | Sign | ature: | | | Dat | e: | | | | |
| Name of Director/Secretary: | | Sign | ature: | | | Dat | e: | | | | |
| If you are affixing a company seal, please mark a cross: | | Affix | Compa | any Seal | here: | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

4. SETTLEMENT

Please tick the relevant box confirming your method of payment

| 4A. ELECTRONIC BANK TRANSFER |
|--|
| If you are subscribing for Ordinary Shares and sending subscription monies by electronic bank transfer (CHAPS), payment must be made for value by 11.00 a.m. on 23 October 2020. Please contact JTC Registrars (UK) Limited by email at registrars@jtcgroup.com for full bank details. You will be provided with a unique reference number which must be used when making the payment. |
| |

Please enter below the sort code of the bank and branch you will be instructing to make such payment for the value by 11.00 a.m. on 23 October 2020 together with the name and number of the account to be debited with such payment and the branch contact details.

| Sort Code: | Account Number: |
|---------------|------------------------|
| Account Name: | Bank Name and Address: |

4B. SETTLEMENT BY DELIVERY VERSUS. PAYMENT (DVP)

Only complete this section if you choose to settle your application within CREST, that is delivery versus payment (DVP).

Please indicate the CREST Participant ID from which the DEL message will be received by the Receiving Agent for matching, which should match that shown in 2B above, together with the relevant Member Account ID.

(BLOCK CAPITALS)

| CREST Participant ID: | | | | | |
|--------------------------|--|--|--|--|--|
| CREST Member Account ID: | | | | | |

You or your settlement agent/custodian's CREST account must allow for the delivery and acceptance of Ordinary Shares to be made against payment at the Issue Price per Ordinary Share, following the CREST matching criteria set below:

Trade Date: 26 October 2020 Settlement Date: 29 October 2020

Company: BUFFETTOLOGY SMALLER COMPANIES INVESTMENT TRUST

A.11.4.1 PR

Security Description: Ordinary Shares of £0.01 each

SEDOL: BMDFG96
ISIN: GB00BMDFG969

Should you wish to settle DVP, you will need to match your instructions to JTC Registrars (UK) Limited's Participant account 7RA80 by no later than 1.00 p.m. on 28 October 2020.

You must also ensure that you or your settlement agent/custodian have a sufficient "debit cap" within the CREST system to facilitate settlement in addition to you/their own daily trading and settlement requirements.

5. RELIABLE INTRODUCER DECLARATION

Completion and signing of this declaration by a suitable person or institution may avoid presentation being requested of the identity documents detailed in section 6 of this form.

The declaration below may only be signed by a person or institution (such as a governmental approved bank, stockbroker or investment firm, financial services firm or an established law firm or accountancy firm) (the "**firm**") which is itself subject to its own country to operation of "know your customer" and anti-money laundering regulations no less stringent than those which prevail in the United Kingdom.

DECLARATION:

To the Company and the Receiving Agent

With reference to the holder(s) detailed in section 2A, all persons signing at section 3 and the payor identified in section 6 if not also a holder (collectively the "subjects") WE HEREBY DECLARE:

- 1. we operate in the United Kingdom, or in a country where money laundering regulations under the laws of that country are, to the best of our knowledge, no less stringent than those which prevail in the United Kingdom and our firm is subject to such regulations;
- 2. we are regulated in the conduct of our business and in the prevention of money laundering by the regulatory authority identified below;
- each of the subjects is known to us in a business capacity and we have undertaken identity checks on each of them within the last two years and we undertake to immediately provide to you copies of such checks on demand;
- 4. we confirm the accuracy of the names and residential/business address(es) of the holder(s) given at section 2A:
- 5. having regard to all local money laundering regulations we are, after enquiry, satisfied as to the source and legitimacy of the monies being used to subscribe for the Ordinary Shares mentioned; and
- 6. where the payor and holder(s) are different persons we are satisfied as to the relationship between them and reason for the payor being different to the holder(s).

The above information is given in strict confidence for your own use only and without any guarantee, responsibility or liability on the part of this firm or its officials.

| Signed: | Name: | | Position: | | | |
|--|-------------------|------------------|-----------|--|--|--|
| Name of regulatory authority: | | Firm's licence n | umber: | | | |
| Website address or telephone number of regulatory authority: | | | | | | |
| STAMP of firm giving full name an | d business addres | s: | | | | |
| | | | | | | |

6. IDENTITY INFORMATION

If the declaration in section 5 cannot be signed and the value of your application is greater than €15,000 (or the sterling equivalent), please enclose with that Application Form the documents mentioned below, as appropriate. Please also tick the relevant box to indicate which documents you have enclosed, all of which will be returned by the Receiving Agent to the first named Applicant.

| | Payor | | | |
|--|-------|--|--|--|
| | | | | |

Tick here for documents provided

In accordance with internationally recognised standards for the prevention of money laundering, the documents and information set out below must be provided:

| A. | For each holder being an individual enclose: | | |
|-----|--|--|--|
| (1) | an original or an originally certified clear photocopy of a current passport which bears both a photograph and the signature of the person; and | | |
| (2) | an original or an originally certified copy of one of the following documents, which is no more than 3 months old and which purports to confirm that the address given in section 2A is that person's residential address: a recent gas, electricity, water or telephone (not mobile) bill – a recent bank statement – a council rates bill – or similar document issued by a recognised authority; and | | |
| (3) | if none of the above documents show their dates and place of birth, enclose a note of such information; and | | |
| (4) | details of the name and address of their personal bankers from which the Receiving Agent may request a reference, if necessary. | | |
| В. | For each holder being a company (a "holder company") enclose: | | |
| (1) | an originally certified copy of the certificate of incorporation of the holder company; and | | |
| (2) | the name and address of the holder company's principal bankers from which the Receiving Agent may request a reference, if necessary; and | | |
| (3) | an originally signed statement as to the nature of the holder company's business, signed by a director; and | | |
| (4) | an originally certified list of the names and residential addresses of each director of the holder company; and | | |
| (5) | for each director provide originally certified documents and information similar to that mentioned in A above; and | | |
| (6) | an originally certified copy of the most recent authorised signatory list for the holder company; and | | |
| (7) | an originally certified list of the names and residential/registered address of each ultimate beneficial owner interested in more than 10 per cent. of the issued share capital of the holder company and, where a person is named, also complete C below and, if another company is named (hereinafter a "beneficiary company"), also complete D below. If the beneficial owner(s) named do not directly own the holder company but do so indirectly via nominee(s) or intermediary entities, provide details of the relationship between the beneficial owner(s) and the holder company. | | |

128

C. For each person named in B(7) as a beneficial owner of a holder company enclose for each such person documents and

information similar to that mentioned in A(1) to (4).

| D. | For each beneficiary company named in B(owner of a holder company enclose: | 7) as a beneficial | | | | | |
|--|---|--|--|--|-----------------------------------|--------------------------------------|---------------------------------|
| (1) | an originally certified copy of the certificate of beneficiary company; and | incorporation of that | | | | | |
| (2) | an originally signed statement as to the natu company's business signed by a director; and | ire of that beneficiary | | | | | |
| (3) | the name and address of that beneficiary compa from which the Receiving Agent may request a r and | | | | | | |
| (4) | an originally certified list of the names and resider of each beneficial owner owning more than 10 per share capital of that beneficiary company. | _ | | | | | |
| E. | If the payor is not a holder and is not a ban banker's payment on the reverse of which i the account being debited with such payme how to complete this form) enclose: | s shown details of | | | | | |
| (1) | if the payor is a person, for that person the dor A(1) to (4); or | cuments mentioned in | | | | | |
| (2) | if the payor is a company, for that company the in B(1) to (7); and | documents mentioned | | | | | |
| (3) | an originally signed detailed explanation of the repayor and the holder(s) and the rationale for funda third party. | | | | | | |
| | Receiving Agent reserves the right to ask for addrmation. | itional documents and | | | | | |
| 7. C | CONTACT DETAILS | | | | | | |
| personal per | ensure the efficient and timely processing of this a son the Receiving Agent may contact with all enqui son should be the person signing in section 3 on be but a regulated person is identified in section 5, to details are entered here and no regulated person in their information, any delay in obtaining that additional cited or revoked. | ries concerning this app chalf of the first named he he Receiving Agent will s named in section 5 and | lication older. If contact d the Re | . Ordina no deta t the reg eceiving | rily th Is are ulate Age | nis co e prov ed pe ent rec | ntac vided rson quires |
| Coi | ntact name: | E-mail address: | | | | | |
| Coi | ntact address: | | | | | | |
| | | Postcode: | | | | | |
| Tele | ephone No: | Fax No: | | | | | |