

GLDUS126 Pacific Life Insurance Co
Letter of Authorization for Fund Investment

Dear Client:

In connection with your subscription for an interest in the alternative investment fund listed below (the "Fund") that is managed by iCapital Advisors, LLC (the "Manager") and offered by Deutsche Bank Securities Inc. ("Deutsche Bank") as placement agent, Deutsche Bank will be required to provide the Manager, the Fund or their affiliates, or the Fund's administrator (collectively referred to herein as "iCapital Parties") with certain information about you, as follows:

1. If you are a natural person:

- Your name, residential address, and social security or other tax identification number;
- Evidence regarding date of birth and confirmation of middle initial of name;
- Copies of identification documents such as your passport or driver's license;
- Other information related to verification of identity and financial condition as required by applicable law.

2. If you are a corporate structure or trust:

- Incorporation documentation / formation documentation (for example, certificate of incorporation, memorandum & articles, trust deed (including incorporation documentation for any corporate entities or trusts who are beneficial owners of the undersigned);
- ID documentation for individuals who are beneficial owners (>25%);
- Other information related to verification of identity and financial condition as required by applicable law.

This information is referred to herein as the "Information". Accordingly, Deutsche Bank requests your consent to share your Information with the iCapital Parties and to receive from the iCapital Parties information pertaining to your Fund investment. Deutsche Bank regards protecting your personal information as one of our fundamental responsibilities.

*** PLEASE TURN THE TO NEXT PAGE ***

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*** PLEASE CHECK THE FOLLOWING BOXES AND SIGN BELOW ***

Name of Fund:

Glendower Access Secondary Opportunities IV (U.S.), L.P.

☐ The undersigned authorizes Deutsche Bank to provide the undersigned's Information to the iCapital Parties in order to assist the iCapital Parties to verify the

undersigned's identity or obtain other "know your customer" information in connection with

the undersigned's investment in the Fund.

☐ The undersigned authorizes Deutsche Bank to transfer funds from the undersigned's Deutsche Bank account referenced below (the "Client Account") in order to fund

any required capital contribution by the undersigned to the Fund.

☐ In addition, the undersigned authorizes Deutsche Bank to receive from the iCapital Parties any information relating to the undersigned's Fund investment, including but

not limited to all correspondence, statements of account and valuations, at the electronic

and/or physical address directed by Deutsche Bank.

☐ The undersigned acknowledges that (1) Fund interests will not be held at Deutsche Bank; (2) estimated values of the Fund provided by the iCapital Parties to Deutsche

Bank and reported on Client Account statements provided by Deutsche Bank will be for

informational purposes only and may not reflect current Fund values or recent activity; and (3)

statements of account for the Fund will be sent directly to the undersigned by the iCapital

Parties, and not by Deutsche Bank.

The undersigned's authorization shall be valid until revoked in writing.

Client Authorization:

(If you are signing on behalf of your organization, please ensure you are an authorized signatory)

Name:

Signature: _____

Title (if applicable):

Date: _____

Deutsche Bank Representative Name / Number (if applicable):

Subscription Amount: \$ _____

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Placement Fee: \$ _____

Initial Capital Contribution Amount: \$ _____

Deutsche Bank Account Number:

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