

Please read Product labeling details available on cover page and instructions before filling this Form Application No.:

| Distributor/RIA name and ARN/Code  | Sub Broker ARN & Name  | Sub Broker/B                     | ranch/RM Internal Code                           | EUIN (Refer no  | ote below)           | For Office use only  |
|--|--|----------------------------------|--|-----------------|----------------------|--|
| 130842   |  |                                  |  | E21582          | 6                    |  |
| I/We confirm that the EUIN box is inter<br>transaction without any interaction or<br>Upfront commission shall be paid directl<br>assessment of various factors including t | y by the investor to the AMF<br>he service rendered by the o | I registered Di<br>distributor.  | "execution-only" terned. stributors based on the |                 | ry. Sole /           | First Applicant's Signature Mandatory  |
| 1. FIRST APPLICANT'S DETAILS   |  |                                  |  |                 |                      |  |
| Name of First Applicant (Shoul   | d match with PAN/Aad   | lhar Card)                       |  |                 |                      | Date of Birth (1st Appl / Minor) (attach proof)  D   D   /   M   M   /   Y   Y   Y   Y |
| Name of Guardian (if minor)/P  | OA/Contact Person  |                                  |  |                 |                      | Date of Birth (Guardian)   |
| Existing Folio   | PAN (1st A   | Appl / Guardian)                 |  |                 |                      | Guardian is:  ☐ Father ☐ Mother ☐ Court Appointed                                      |
| CKYC - KIN   |  | PAN of PO                        |  | KYC attach      | ad                   | Tattlet Mottlet Court Appointed  |
| CRIC - RIN   |  | PAN OI PO                        | A  | NIC attach      | eu                   |  |
| 2. CONTACT DETAILS AND CORI  | RESPONDENCE ADDRE  | SS (As per                       | KYC records)                                     |                 |                      |  |
| Email ID   |  |                                  |  |                 |                      | Address Type (Mandatory)   |
| (in capital)  Mobile +91   |  | Tel (STI                         | Code)  |                 |                      | ☐ a. Residential & Business  |
| Address  |  |                                  |  |                 |                      | ☐ b. Residential ☐ c. Business   |
| /tudi coo  |  |                                  |  |                 |                      | d. Registered Office   |
| Landmark   |  |                                  |  |                 |                      |  |
| City   |  | Pin Code<br>(Mandator            |  | S               | State                |  |
| 3. KYC DETAILS (Mandatory)   |  | (Maridacor                       | 77   |                 |                      |  |
| 3a. Status of Sole/1st Applicant   | (Please tick ✓) ○ India                                      | an Resident Inc                  | dividual O Minor (Resid                          | dent) O Minor   | (Repatriable) O Mi   | nor (Non Repatriable)  |
|  | rance Companies O Governme<br>GDN O Defence Establishmen     | ent Body O AO<br>t O NPS Trust ( | P/BOI O Trust O Society O Others                 | y O Provident F | Fund O Superannuatio |  |
| <b>3b.</b> Occupation Details (Please Agriculturist O Retired O Hour   | e tick ✓) ○ Private See                                      | ctor Service                     | O Public Sector Ser                              | vice O Gove     |                      | Business O Professional  |
| 3c. Gross Annual Income (Plea  | se tick ✓) ○Below 1  | Lac 01-5                         | Lacs ©5-10 Lacs                                  | ○10-25 L        | acs O>25 Lac         | s-1 crore O>1 crore  |
| Net-worth in (Mandatory fo<br>3d. For Individuals (Please tid  |  |                                  |  |                 |                      | ,  |
| 4. JOINT APPLICANTS (IF ANY)   |  | O I alli Poli                    | tically exposed Person                           | 1 O Talli Re    | tated to Politically | exposed Person   |
| Mode of Holding (Please tic  |  | fault)                           | ☐ Anyone or Su                                   | ırvivor         |                      | Date of Birth  |
| 2nd Applicant  |  |                                  |  |                 |                      | D D / M M / Y Y Y  |
| (Should match with PAN/Aadhar Card) PAN  | CKYC - KIN   | ı                                |  |                 |                      |  |
| a. Occupation Details (Please  |  |                                  |  |                 |                      |  |
| <b>b.</b> Gross Annual Income (Plea  | '  | _ac ○ 1-5 I                      | Lacs O 5-10 Lacs O                               | 10-25 Lacs      | O >25 Lacs-1 cror    | e ○ >1 crore   |
| C. Others (Please tick ✓) ○ N  | lot Applicable O Politica                                    | ally Exposed I                   | Person (PEP) O Rela                              | ted to a Politi | cally Exposed Perso  | n (PEP)  |
| 3rd Applicant (Should match with PAN/Aadhar Card)  |  |                                  |  |                 | Date of Birth        | D D / M M / Y Y Y  |
| PAN  | CKYC - KIN   |                                  |  |                 |                      |  |
| <b>a.</b> Occupation Details (Please O Agriculturist O Retired O H   | tick ✓) ○ Private Secto<br>lousewife ○ Student               |                                  |  |                 |                      |  |
| <b>b.</b> Gross Annual Income (Plea  | ise tick ✓) ○Below 1 L                                       | _ac ○ 1-5 l                      | Lacs O 5-10 Lacs O                               | 0 10-25 Lacs    | O >25 Lacs-1 cror    | e O>1 crore  |
| C. Others (Please tick ✓) ○ N  |  |                                  | CREIA  |                 |                      | (FLF)  |
| ACKNOWLEDGEMENT SLIP (To be  | e filled in by the invest                                    | or)                              |  |                 |                      | DSP MUTUAL FUND  |
| Received, subject to realisation and verifica From   | tion an application for purchas                              | e of Units as me                 | entionedin the application                       | form.           |                      | Application No.  |
| Scheme   | Che  | eque no.                         | Amount   |                 |                      |  |
| DSP  |  |                                  |  |                 |                      |  |

|  | S DETAILS  |   |   |  |  |  |  |  |
|--|--|---|---|--|--|--|--|--|
|  | irst Applicant/Gua   | ardian  |   | 2nd Applican   | t  | 3rc  | Applicant  | ☐ POA  |
| Place & Country  | of Birth PLACI   | COUNTRY   | Place & Country   | of Birth PL  | ACE COUNTRY  | Place & Country  | of Birth PLAC  | E COUNTRY  |
| Nationality □ Ind  | ian 🗆 U.S. 🗆 Other   | ·   | Nationality 🗆 In  | idian 🗆 U.S. 🗆 Ot  | her  | Nationality □ Inc  | lian □U.S. □Othe   | r  |
| Please indicate all C<br>If TIN is not available<br>of tax residence enter   | ountries, other than li<br>or mentioned, please i<br>ed above do not requir  | ndia, in which you are<br>mention reason as: 'A' i<br>e the TIN to be disclose  | a resident for tax pur<br>f the country does no<br>ed.  | rpose, associated Tax<br>t issue TINs to its res   | payer Identification Num<br>idents; 'B' & mention why  | ber and it's Identificat<br>you are unable to obta   | ion type eg. TIN etc.<br>in a TIN; 'C' if the auth   | norities of the country  |
| Country #  | Tax Identification<br>Number   | Identification<br>Type/Reason*  | Country #   | Tax Identification   | on Identification<br>Type/Reason*  | Country #  | Tax Identification<br>Number   | Identification<br>Type/Reason*   |
| 1  |  |   | 1   |  |  | 1  |  |  |
| !  |  |   | 2   |  |  | 2  |  |  |
|  |  | "   | 3   |  |  | 3  |  |  |
|  | NT DETAILS (Ava  | il Multiple Bank F  | legistration Faci   | lity)  |  |  |  |  |
| ank Name   |  |   |   |  | A/C To   | a 🗆 Cauringa 🗆 Cur   | rant    NDF    ND  |  |
| ank A/C No.  |  |   |   |  | A/C Typ  | e Savings Cur  | rent NRE NRC   |  |
| ity  |  | Pin   |   |  | IFSC code: (11 dig   | it)  |  |  |
| ICR code (9 di   | git) (This is a 9 digit r  | umber next to your chequ  | ie number)  |  |  |  |  |  |
| INVESTMENT   | AND PAYMENT  | <b>DETAILS</b> (Defaul  | t plan/option/s   | ub option will b   | e applied incase of  | no information,  | ambiguity or dis   | crepancy)  |
| •  |  |   | •   | •  | OR <u>"Scheme Name", i</u>   | -  |  |  |
| One time Lump  | _  | ☐ SIP: Systematic Plan/Option/Sub   |   | Attach OTA   | A form, if not alread  | Cho  | ntion LUMPSUM ar<br>eque Details belov   |  |
| 200  |  | •   | •   | -4:  | Amount (₹  | ·)   | ment Mode:   | _  |
| . DSP -  | Scheme   | Plan  | Option/Sub C  | ption  |  |  | RTGS NEFT  | Funds transfe  |
| . DSP -  | Scheme   | Plan  | Option/Sub C  | Option   |  | Ch   | eque/DD/RTGS/NEF   | FT Details:  |
| . DSP -  | Scheme   | Plan  | Option/Sub C  | ption  |  | Re   | f. No  |  |
|  |  |   | -   |  | Amount in Eis  | Da   | te DD/M  | M / Y Y Y  |
| otal   | Amoun  | t in words  |   |  | Amount in Fig  | DD   | charges, if any  |  |
| ayment from Ba   | ınk A/c No.  | Pay Ir  | n A/c No.   | A  | <b>/c. Type</b> ☐ Savings  | □Current □ NRE [   | □ NRO □ FCNR □   | Others   |
| ank Name   |  |   |   |  |  |  |  |  |
|  |  | l Party Payment R   | ejection, where   | applicable: 🔲 🛭  | ank Certificate, for   | DD Third Pa  | ty Declarations  |  |
| NOMINATION   |  | /We DO NOT wish t   | o nominate and s  | ign here   |  | 1st Applicant Sig  | nature (Mandatory  | <u>/</u> )   |
| g  |  | nee Name  | Relatio   | onship with  | Guardian Name  | Allocat  | on % Nomi  | nee/ Guardian  |
| I .  | 1101111  | nee name  | ар  | plicant (  | In case of Minor)  | Allocat  | 011 /0   | Signature  |
| Nominee 1  |  |   |   |  |  |  |  |  |
|  |  |   |   |  |  |  |  |  |
| Nominee 2  |  |   |   |  |  |  |  |  |
| Nominee 2<br>Nominee 3   |  |   |   |  |  | Total =  | 100%   |  |
| Nominee 2<br>Nominee 3<br>Address  | G OPTION:  |   |   |  |  | Total =  | 100%   |  |
| Nominee 2 Nominee 3 Address UNIT HOLDING   | atement     In   | Demat mode: NSDL  | : I N   |  | epository Participant (DP  | ) ID (NSDL only)   | Enclose for dem  |  |
| Nominee 2 Nominee 3 Address UNIT HOLDING   | atement     In   |   |   |  | epository Participant (DP  | ) ID (NSDL only)   | Enclose for dem Client Master Transaction/H  |  |
| Nominee 2 Nominee 3 Address  UNIT HOLDING In Account St Mode (default  | atement   In   | CDSL  |   | Ве   | eneficiary Account Numb  | ) ID (NSDL only)<br>er (NSDL only)   | Enclose for dem  | List   |
| Nominee 2 Nominee 3 Address UNIT HOLDING In Account St Mode (default   | atement   In   In   In   In   In   In   In   | CDSL:   |   | Ве   |  | ) ID (NSDL only)<br>er (NSDL only)   | Enclose for dem Client Master Transaction/H  | List   |
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| Nominee 2 Nominee 3 Address  UNIT HOLDING In Account St Mode (default)  O. I/We wish to red  1. DECLARATION  | atement   In   In   In   In   In   In   In   | CDSL: of the annual report/   | abridged summary,   | if email id is not re  | eneficiary Account Numb  | ) ID (NSDL only) er (NSDL only)  | Enclose for dem  Client Master  Transaction/H  DIS Copy  | List<br>Holding Statement  |
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| Nominee 2 Nominee 3 Address  . UNIT HOLDING In Account St Mode (default  O. I/We wish to re  1. DECLARATIO  aving read and unders me to time, I / We, he formation requirement the continuity of the contraction of the contra | atement In   | CDSL:  of the annual report/  ES  e Scheme Information D  e of DSP Mutual Fund for  orm, including FATCA a  by mer/us on this form is  Act, Regulation, Rule, N | abridged summary, ocument and Stateme Units of the relevant d CRS requirements, true, correct, and con otification, Direction   | if email id is not re  | eneficiary Account Number Profession of the Police of the  | ernorandum, Instructicerms and conditions, roors and scheme relate in the Scheme is through rernment of India or an  | Enclose for dem  Client Master Transaction/H DIS Copy  DIS Copy  Ins and addenda issued ales and regulations. I / d documents) and here hegitimate sources on Statutory Authority.   | by DSP Mutual Fund for We have understood tely accept the same a lty and is not designed if  |
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### FATCA, CRS AND ADDITIONAL KYC

**Details and Declaration form** 

Authorized Signatories [with Company/Trust/Firm/Body Corporate seal]

efer Page 2 for Definitions / Instructions / Guidance Mandatory for Non-Individual Investors, including HUF INVESTOR DETAILS **Entity Name:** PAN Application No. Folio Nos Residential Type of Address given at KRA Residential or Business **Business** Registered Office ADDITIONAL KYC DETAILS (Mandatory) Gross Annual Income (Please tick ✓) O Below 1 Lac O 1-5 Lacs O 5-10 Lacs ○ 10-25 Lacs ○ >25 Lacs-1 crore as on | D | D | / | M Net-worth in ₹ M / (Not older than 1 year) **INCORPORATION and TAX RESIDENCY DETAILS (Mandatory)** City of Incorporation: Country of Incorporation: Date of Incorporation: (Ifyes, please provide country/ies in which the entity is a resident Is Entity a tax resident of any country other  $\square$  Yes  $\square$  No for tax purposes and the associated Tax ID number below) than India? In case TIN or its functional equivalent is not available, please provide Company Identification number of Global Entity Identification Number or GIIN, etc. Country of Tax Residency TIN or equivalent number Identification Type/Reason\* 1. 2. 3. 4. In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. (refer definition D4) Person (as per définition E5), please mention the exemption code in the box: FATCA and CRS DETAILS (Mandatory) (Please consult your professional tax advisor for further guidance on FATCA & CRS classification) PART I (to be filled by Financial Institutions or Direct Reporting NFEs) We are a, (please tick as appropriate) GIIN Financial Institution (Refer definition A) Note: If you do not have a GIIN but you are sponsored by another entity, please provide your sponsor's GIIN above and indicate your sponsor's name below Direct reporting NFE (Refer definition B) Name of sponsoring entity: GIIN - Not Available Applied for If the entity is a financial institution, Not required to apply for - please specify 2 digits sub-category (refer definition C) Not obtained - Non-participating FI PART II (please fill Any One as appropriate, to be filled by NFEs other than Direct Reporting NFEs) Is the Entity a publicly traded company? Yes (If yes, please specify any one stock exchange on which the stock is regularly traded) (that is, a company whose shares are regularly traded on an established securities market) Name of stock exchange (Refer definition D1) Is the Entity a related entity of a Yes [ (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) publicly traded company? (a company whose shares are regularly Name of listed company\_ traded on an established securities market) ☐ Controlled by a Listed Company Nature of relation: ☐ Subsidiary of the Listed Company OR (Refer definition D2) Name of stock exchange Is the Entity an Active NFE? Yes ◆ Also provide UBO Form □ (Refer definition D3) Nature of Business Please specify the sub-category of Active NFE (Mention code - refer D3) Yes ◆ Also provide UBO Form □ Is the Entity a Passive NFE? (Refer definition E2) Nature of Business\_ I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief and provided after necessary consultation with tax professionals. I/We have understood the information requirements of the application form, including FATCA and CRR requirements, terms and conditions (read along with instructions and scheme related documents) and hereby confirm that the information provided by me/us on this form are true, correct, and complete.

Date:

- A. Financial Institution (FI)- The term FI means any financial institution that is a:
- 1 Depository institution: Accepts deposits in the ordinary course of banking or similar business.
- 2 Custodial institution: An entity that as a substantial portion of its business, holds financial assets for the account of others and where the entity's gross income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of-
  - (a) The three-year period ending on December 31 of the year preceding the year in which the determination
  - (b) The period during which the entity has been in existence before the determination is made)
- 3 Investment entity: Conducts a business or operates for or on behalf of a customer for any of the following activities: (a) Trading in money market instruments, foreign exchange, foreign currency,etc. (b) Individual or collective portfolio management. (c) Investing, administering or managing funds, money or financial asset on behalf of other persons. [OR] The gross income of which is primarily attributable to investing, reinvesting, or trading in financial assets, if the entity is managed by another entity that is a depository institution, a custodial institution, a specified insurance company, or an investment entity described herein. An entity is treated as primarily conducting as a business one or more of the 3 activities described above, or an entity's gross income is primarily attributable to investing, reinvesting, or trading in financial assets of the entity's gross income attributable to the relevant activities equals or exceeds 50 percent of the entity's gross income during the shorter of: (i) The three-year period ending on 31 March of the year preceding the year in which the determination is made; or (ii) The period during which the entity has been in existence.
- 4 Specified Insurance company: Entity issuing insurance products i.e. life insurance or cash value products.
- 5 Holding company or treasury company: Is an entity that is a holding company or treasury centre that is a part of an expanded affiliate group that includes a depository, custodial institution, specified insurance company or investment entity
- B. Direct Reporting NFE: means a Non-financial Entity (NFE) that elects to report information about its direct or indirect substantial U.S. owners to the IRS
- C. GIIN not required: Categories with codes

| Code | Sub-Category  |
|------|---|
| 01   | Governmental Entity, International Organization or Central Bank   |
| 02   | Treaty Qualified Retirement Fund; a Broad Participation Retirement Fund; a Narrow Participation Retirement Fund; or a Pension Fund of a Governmental Entity, International Organization or Central Bank |
| 03   | Non-public fund of the armed forces, an employees' state insurance fund, a gratuity fund or a provident fund  |
| 04   | Entity is an Indian FI solely because it is an investment entity  |
| 05   | Qualified credit card issuer  |
| 06   | Investment Advisors and Investment Managers   |
| 07   | Exempt collective investment vehicle  |
| 08   | Trustee of an Indian Trust  |
| 09   | FI with a local client base   |
| 10   | Non-registering local banks   |
| 11   | FI with only Low-Value Accounts   |
| 12   | Sponsored investment entity and controlled foreign corporation  |
| 13   | Sponsored, Closely Held Investment Vehicle  |
| 14   | Owner Documented FI   |

- D. Non-Financial Entity (NFE): Entity that is not a financial institution (including a territory NFE). Types of NFEs excluded from FATCA reporting are as below
  - Publicly traded corporation (listed company): A company is publicly traded if its stock are regularly traded on one or more established securities markets
  - 2. Related entity of a listed company: The NFE is a related entity of an entity of which is regularly traded on an established securities market;
  - 3. Active NFE: (is any one of the following):

| Code | Sub-Category Sub-Category  |
|------|--|
| 01   | Less than 50 percent of the NFE's gross income for the preceding financial year or other appropriate reporting period is passive income and less than 50 percent of the assets held by the NFE during the preceding calendar year or other appropriate reporting period are assets that produce or are held for the production of passive income;  |
| 02   | The NFE is a Governmental Entity, an International Organization, a Central Bank, or an entity wholly owned by one or more of the foregoing;  |
| 03   | Substantially all of the activities of the NFE consist of holding (in whole or in part) the outstanding stock of, or providing financing and services to, one or more subsidiaries that engage in trades or businesses other than the business of a Financial Institution, except that an entity shall not qualify for NFE status if the entity functions (or holds itself out) as an investment fund, such as a private equity fund, venture capital fund, leveraged buyout fund, or any investment vehicle whose purpose is to acquire or fund companies and then hold interests in those companies as capital assets for investment purposes; |
| 04   | The NFE is not yet operating a business and has no prior operating history, but is investing capital into assets with the intent to operate a business other than that of a Financial Institution, provided that the NFE shall not qualify for this exception after the date that is 24 months after the date of the initial organization of the NFE;  |
| 05   | The NFE was not a Financial Institution in the past five years, and is in the process of liquidating its assets or is reorganizing with the intent to continue or recommence operations in a business other than that of a Financial Institution;  |
| 06   | The NFE primarily engages in financing and hedging transactions with, or for, Related Entities that are not Financial Institutions, and does not provide financing or hedging services to any Entity that is not a Related Entity, provided that the group of any such Related Entities is primarily engaged in a business other than that of a Financial Institution;   |

- Any NFE is a 'non for profit' organization which meets all of the following requirements
  - It is established and operated in its jurisdiction of residence exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in its jurisdiction of residence and it is a professional organization, business league, chamber of commerce, labor organization, agricultural or horticultural organization, civic league or an organization operated exclusively for the promotion of social welfare;
  - · It is exempt from income tax in India;
  - It has no shareholders or members who have a proprietary or beneficial interest in its income

The applicable laws of the NFE's jurisdiction of residence or the NFE's formation documents require that, upon the NFE's liquidation or dissolution, all of its assets be distributed to a governmental entity or other non-profit organization, or escheat to the government of the NFE's jurisdiction of residence or any political subdivision

| Code | Sub-Category   |
|------|--|
| Α    | An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)   |
| В    | The United States or any of its agencies or instrumentalities  |
| С    | A state, the District of Columbia, a possession of the United States, or any of their political subdivisions or instrumentalities  |
| D    | A corporation the stock of which is regularly traded on one or more established securities markets as described in Reg. section 1.1472-1(c)(1)(i)  |
| E    | A corporation that is a member of the same expanded affiliated group as a corporation describe in Reg. section 1.1472-1(c)(1)(i)   |
| F    | A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the Unite States or any state |
| G    | A real estate investment trust   |
| Н    | A regulated investment company as defined in section 851 or an entity registered at all times durin the tax year under the Investment Company Act of 1940  |
| I    | A common trust fund as defined in section 584(a)   |
| J    | A bank as defined in section 581   |
| K    | A broker   |
| L    | A trust exempt from tax under section 664 or described in section 4947(a)(1)   |
| М    | A tax exempt trust under a section 403(b) plan or section 457(g) plan  |
| 14   | Owner Documented FI  |

### E. Other definitions

documented

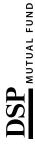
FI:

- 1 Related entity: An entity is a related entity of another entity if either entity controls the other entity or the two entities are under common control. For this purpose, control includes direct or indirect ownership of more than 50% of the vote or value in an entity.
- 2 Passive NFE: The term passive NFE means any NFE that is not (i) an Active NFE (including publicly traded entities or their related entities), or (ii) a withholding foreign partnership or withholding foreign trust pursuant to relevant U.S. Treasury Regulations.(Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)
- 3 Passive income: The term passive income means the portion of gross income that consists of: (a) Dividends, including substitute dividend amounts; (b) Interest; (c) Income equivalent to interest, including substitute interest and amounts received from or with respect to a pool of insurance contracts if the amounts received depend in whole or part upon the performance of the pool; (d) Rents and royalties, other than rents and royalties derived in the active conduct of a trade or business conducted, at least in part, by employees of the NFE; (e) Annuities; (f) The excess of gains over losses from the sale or exchange of property that gives rise to passive income described in this section.; (g) The excess of gains over losses from transactions (including futures, forwards, and similar transactions) in any commodities, but not including: (i) Any commodity hedging transaction, determined by treating the entity as a controlled foreign corporation; or (ii) Active business gains or losses from the sale of commodities, but only if substantially all the foreign entity's commodities are property (h) The excess of foreign currency gains over foreign currency losses; (i) Net income from notional principal contracts; (j) Amounts received under cash value insurance contracts; (k) Amounts earned by an insurance company in connection with its reserves for insurance and annuity contracts
- 4 Controlling persons: Controlling persons are natural persons who exercise control over an entity. In the case of a trust, such term means the settlor, the trustees, the protector (if any), the beneficiaries or class of beneficiaries, and any other natural person exercising ultimate effective control over the trust. In the case of a legal arrangement other than trust, such term means persons in equivalent or similar positions. The term "Controlling Persons" shall be interpreted in a manner consistent with the Financial Action Task Force recommendations
- 5 Specified US Persons Any US Person other than i). A publicly traded corporation; ii). A corporation that is a member of the same expanded affiliate group; iii). A tax exempt organization; iv). an individual retirement plan; v). the United States or an agency or instrumentality of the United States; vi). Any state [including District of Columbia and United States possession] or State Authorities; vii). A bank, viii). A real estate investment trust; ix). A regulated investment company; x). an entity registered with the SEC under the Investment Company Act of 1940; xi). A common trust fund; xii). A tax exempt trust; xiii). A registered dealer; xiv). A registered broker
- 6 Expanded affiliated group: Expanded affiliated group is defined to mean one or more chains of members connected through ownership (50% or more, by vote or value, as the case may be) by a common parent entity if the common parent entity directly owns stock or other equity interests meeting the requirements in at least one of the other members

the

FI

7 Owner An meeting following (i) The FI is an FI solely because it is an investment entity; (ii) The FI is not owned by or related to any FI that is a depository institution, custodial institution, or specified insurance company; (iii) The FI does not maintain a financial account for any nonparticipating FI; (iv) The FI provides the designated withholding agent with all of the documentation and agrees to notify the withholding agent if there is a change in circumstances; and (v) The designated withholding agent agrees to report to the IRS (or, in the case of a reporting Model 1 FI, to the relevant foreign government or agency thereof) all of the information described in or (as appropriate) with respect to any specified U.S. persons and (2). Notwithstanding the previous sentence, the designated withholding agent is not required to report information with respect to an indirect owner of the FI that holds its interest through a participating FI, a deemed-compliant FI (other than an owner-documented FI), an entity that is a U.S. person, an exempt beneficial owner, or an excepted NFE.



# (Mandatory for Non-Individual Applicants/Investors, including HUF)

Ultimate Beneficial Ownership (UBO) Declaration form

This declaration is NOT needed for Companies that are Listed on any recognized stock exchange in India or is a Subsidiary of such Listed Company or is Controlled by such Listed Company A: APPLICANT/INVESTOR DETAILS:

| _                |             |   | [please specify]   |   | ation in the given  | Occupation  |            |             | ☐ Service | ☐ Business | ☐ Others | ☐ Service | ☐ Business | ☐ Others | □ Service | ☐ Business | ☐ Others | ☐ Service | ☐ Business | □ Others | ☐ Service | ☐ Business | □ Others |  |
|------------------|-------------|---|--|---|---|---|------------|-------------|-----------|------------|----------|-----------|------------|----------|-----------|------------|----------|-----------|------------|----------|-----------|------------|----------|--|
|                  |             |   |  |   | ent, required informa   | Nationality   |            | -           |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
| Application No.: |             |   | a Will Others  |   | given rows are not suffici  | Father's Name   | . provided | 2000        |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
| Ā                |             |   | st created by  |   | erson. If the   | Gender<br>[Male,<br>Female,<br>others]                                  | if PAN not |             |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | Unincorporated association / body of individuals □ Public Charitable Trust □ Religious Trust □ Private Trust Trust created by a Will | not adequate, please attach multiple declaration forms)               | Please list below each controlling person, confirming ALL countries of tax residency / permanent address / citizenship and ALL Tax Identification Numbers for EACH controlling person. If the given rows are not sufficient, required information in the given format | Address & Contact<br>details [include City,<br>Pincode, State, Country  |            | mail accord |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | ust Religious  | ach multiple d  | Identification Num  | Date of Birth<br>[dd- mmm-<br>yyyy]                                     |            | 1           |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | ıblic Charitable Tr  | ate, please att   | ship and ALL Tax  | Place &<br>Country of<br>Birth  |            | 7           |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | ndividuals 🔲 Pu  | is not adequ  | t address / citizen   | Controlling person type Code (Refer Instruction 5)                      |            |             |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | on / body of ii  | ace below   | y / permanen  | % of<br>beneficial<br>interest  |            |             |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             |   | orporated associati  | (If the given sp  | ies of tax residenc<br>orized Signatories.  | Document Type<br>(Refer<br>Instruction 4)                               | Mandatory  | marcol y    |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  | Folio Nos.: | gory]:                                  |  | SIAL OWNERS   | nfirming ALL countr<br>July signed by Autho   | PAN / Taxpayer<br>Identification<br>Number /<br>Equivalent ID<br>Number |            |             |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
|                  |             | applicable cate                         | Partnership Firm   | MATE BENEFIC  | ntrolling person, coadditional sheet(s)   | Country of<br>Tax Residency   |            |             |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
| *:               |             | B: CATEGORY [tick applicable category]: | Unlisted Company Dartnership Firm LLP  | C: DETAILS OF ULTIMATE BENEFICIAL OWNERS (If the given space below is | se list below each cor  | Name of UBO<br>[Mandatory]  |            | 1           |           |            |          |           |            |          |           |            |          |           |            |          |           |            |          |  |
| Name:            | PAN:        |   | Ĭ I  | ပ   | Plea  | S No  |            | 1           |           | _          |          |           | 2          |          |           | e          |          |           | 4          |          |           | 2          |          |  |

1 / We have understood the information requirements of the application form, including FATCA and CRS requirements, terms and conditions (read along with instructions and scheme related documents) and hereby accept the same and further confirm that the information provided by me/us on this form are true, correct, and complete. I /We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief and provided after necessary consultation with tax professionals.

Authorized Signatories [with Company/Trust/Firm/Body Corporate seal] Date: Page 1 of 2

## Instructions on controlling persons / Ultimate beneficial owner

As per SEBI Master Circular No. CIR/ISD/AML/3/2010 dated December 31, 2010 regarding Client Due Diligence policy, related circulars on anti-money laundering and SEBI circular No. CIR/MIRSD/2/2013 dated January 24, 2013, non-individuals and trusts are required to provide details of controlling persons [CP] / ultimate beneficiary owner [UBO] and submit appropriate proof of identity of such CPs/ UBOs. The beneficial owner has been defined in the circular as the natural person or persons, who ultimately own, control or influence a client and/or persons on whose behalf a transaction is being conducted, and includes a person who exercises ultimate effective control over a legal person or arrangement.

### For Investors other than individuals or trusts:

- ) The identity of the natural person, who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest. Controlling ownership interest means ownership offentitlement to:
- more than 25% of shares or capital or profits of the juridical person, where the juridical person is a
- . more than 15% of the capital or profits of the juridical person, where the juridical person is a partnership;
- more than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.
- (ii) In cases where there exists doubt under clause (i) above as to whether the person with the controlling ownership interest is the beneficial owner or where no natural person exerts control through ownership interests, the identity of the natural person exercising control over the juridical person through other means like through voting rights, agreement, arrangements or in any other manner.
- (iii) Where no natural person is identified under clauses (i) or (ii) above, the identity of the relevant natural person who holds the position of senior managing official.

### 2. For Investors which is a trust:

The identity of the settler of the trust, the trustee, the protector, the beneficiaries with 15% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

## Exemption in case of listed companies / foreign investors:

The client or the owner of the controlling interest is a company listed on a stock exchange, or is a majority-owned subsidiary of such a company, it is not necessary to identify and verify the identity of any shareholder or beneficial owner of such companies. Intermediaries dealing with foreign investors' viz., Foreign Institutional Investors, Sub Accounts and Qualified Foreign Investors, may be guided by the clarifications issued vide SEBI circular CIR/MIRSD/11/2012 dated September 5, 2012, for the purpose of identification of beneficial ownership of the client

## 4. Document Type: Please mention the Code or Document as per table below

| •    |                       |
|------|-----------------------|
| Code | Description           |
| A    | Passport              |
| В    | Election ID Card      |
| Э    | PAN Card              |
| a    | ID Card               |
| 3    | Driving License       |
| 9    | UIDIA / Aadhar letter |
| Н    | NREGA Job Card        |
| Z    | Others                |
|      |                       |

# 5. Controlling Person Type [UBO] Codes: Please mention the Code as per table below

| Ob Code      | Doscription  |
|--------------|--|
| or Type Code | Description  |
| C01          | CP of legal person - ownership                                     |
| C02          | CP of legal person - other means                                   |
| C03          | CP of legal person - senior managing official                      |
| C04          | CP of legal arrangement - trust - settlor                          |
| C05          | CP of legal arrangement - trust - trustee                          |
| 900          | CP of legal arrangement - trust - protector                        |
| C07          | CP of legal arrangement - trust - beneficiary                      |
| C08          | CP of legal arrangement - trust - other                            |
| 600          | CP of legal arrangement - trust - other - settlor equivalent       |
| C10          | CP of legal arrangement - trust - other - trustee - equivalent     |
| C11          | CP of legal arrangement - trust - other - protector equivalent     |
| C12          | CP of legal arrangement - trust - other - beneficiary - equivalent |
| C13          | CP of legal arrangement - trust - other - other - equivalent       |
| C14          | Unknown  |