ARN - 16709

E039709



Declaration for Ultimate Beneficial Ownership [UBO] (Mandatory for Non-individual Applicant/Investor)

To be filled in BLOCK LETTERS (Please strike off section(s) that is/are not applicable)

Part I: Applicant/Investor det	ails:						
Investor Name:							
PAN							
Part II: Applicable for Listed	Company / its subsidiary com	pany only					
(i) I/ We hereby declare that -							
Our company is a Listed Company listed on recognized stock exchange in India							
Our company is a subsidiary of the Listed Company							
Our company is controlled by a Listed Company							
(ii) Details of Listed Company ^							
•	Stock Exchange on which listed Security ISIN						
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(i) Category [✓ applicable categor	er than Listed Company / its su	losidiary company					
Unlisted Company	Partnership Firm	Limite	d Liability Partnership) Company			
Unincorporated associati			Charitable Trust	Religious Tru	ıet		
	· •			Hongious Hu		[-]	
Private Trust (ii) Details of Ultimate Beneficiary	Private Trust created to	by a will	Others			[please specify]	
(In case the space provided is	insufficient, please provide the info	rmation by attaching	separate declaration	forms)			
Name of UBO [Mandatory]							
Along with Designation / Position wherever applicable							
UBO Code [Refer instruction 3]							
PAN or any other valid ID proof							
for those where PAN is not applicable ¹							
KYC (Yes/No) ²							
Taxpayer Identification							
Number ³							
Country of Tax Residency [CTR]							
Country of Birth [COB]							
Country of Dormonost							
Country of Permanent Address [CPA]							
Percentage of Holding (%) ⁴							
	roof to be enclosed. Else PAN or an	y other valid identity p	roof must be attache	d. Position / Designation lik	ke Director / Settlor of Tru	st / Protector of Trust to be	
specified wherever applicable. 2 - If UBO is not KYC compliant, requ	lest to complete KYC formalities and	send the intimation to	CAMS /Fund_Attach va	alid address proof			
² - If UBO is not KYC compliant, request to complete KYC formalities and send the intimation to CAMS /Fund. Attach valid address proof. ³ - If UBO is resident / citizen of 'other than India' or citizen/tax resident/green card holder of USA, please provide Taxpayer ID Number/US Social Security Number [SSN]							
	ike Shareholding pattern duly self att I be self-certified by the UBO and co			· ·			
Note. Attached documents should	be sen-cerunea by the Obo and Co	л инва ву шв Аррнов	iii/iiiv63toi Autiioii2t	su Signatory/168.			
Part IV: Declaration							
	at the information provided above is/	are true and correct to	the best of my/our k	nowledge and belief. In the	event any of the above int	formation is/are found to be	
I/We acknowledge and confirm that the information provided above is/are true and correct to the best of my/our knowledge and belief. In the event any of the above information is/are found to be false/incorrect and/or the declaration is not provided, then the AMC/Trustee/Mutual Fund shall reserve the right to reject the application and/or reverse the allotment of units and the AMC/Mutual							
Fund/Trustee shall not be liable for the same. I/We hereby authorize sharing of the information furnished in this form with all SEBI Registered Intermediaries and they can rely on the same. In case the above information is not provided, it will be presumed that applicant is the ultimate beneficial owner, with no declaration to submit. I/We also undertake to keep you informed in writing about any							
changes/modification to the above i	information in future and also underta	ake to provide any othe	r additional informatio	n as may be required at you	rend.		
Authorized Signatories [with Compa	any/Trust/Firm/Body Corporate seal]						
•							
		Place:					