

email id

contact details

Declaration Form of Ultimate Beneficial Ownership (UBO)/Controlling Persons
(Mandatory for all Non-Individual Investors to provide this on their official letterhead)

I: Investor Details

Name of Investor			Name of Investor										
PAN*		Authorised PAN number											

**If PAN is not available, specify Folio No. (s)*

II: Category **Select the category, as applicable.**

☐ Our company is a Listed Company listed / Subsidiary or Controlled by a Listed Company [If this category is selected, no need to provide UBO details]

☐ Unlisted Company ☐ Partnership Firm / LLP ☐ Unincorporated association / body of individuals ☐ Public Charitable Trust ☐ Private Trust

☐ Religious Trust ☐ Trust created by a Will ☐ Others *[please specify]*. _____

UBO / Controlling Person(s) details

[illegible]

Mandatory fields

* Address Type should either Residence or Business or Registered Office

\$ Mandatory if PAN of UBO/Controlling persons is not provided

Note: If the given rows are not sufficient, required information in the given format can be enclosed as additional sheet(s) duly signed by Authorized Signatory

*Note that some of the Mutual Funds may call for additional information/documentation wherever required or if the given information is not clear / incomplete / incorrect and you may to have provide the same as and when solicited

PMLA guidelines for Identification of Beneficial Owners: - With reference to amendment id Master Direction on Know Your Customer, the threshold for "Controlling ownership Interest / Control "For the purpose of determination of Beneficial Owner has been revised. Below table details the threshold which to be followed.

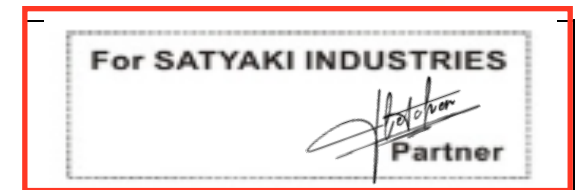
Type of Entity	Thresholds
Companies (One person Company / Public - Private limited/ Section 25-8, Partnership Firm / LLP	More Than 10 Percent
BOI / AOP - Association of Persons/ Society	More Than 15 Percent
Registered / Unregistered Trust	Beneficial owners Shall Include Identification of
	* The author of the Trust
	* The Trustee
	* The Beneficiaries with 10% or More Interest in the Trust
	* Any Other natural Person exercising Ultimate effective control over the trust through chain of Control or Ownership

- Please note that KYC require for all the Beneficial owner having controlling ownership define entity type even after they are authorized or not.

Declaration

I/We acknowledge and confirm that the information provided above is true and correct to the best of my/our knowledge and belief. In case any of the above specified information is found to be false or untrue or misleading or misrepresenting, I/We am/are aware that I/We may liable for it. I/We hereby authorize you [CAMS/Fund/AMC/Other participating entities] to disclose, share, remit in any form, mode or manner, all / any of the information provided by me, including all changes, updates to such information as and when provided by me to Mutual Fund, its Sponsor, Asset Management Company, trustees, their employees / RTAs ('the Authorized Parties') or any Indian or foreign governmental or statutory or judicial authorities / agencies including but not limited to the Financial Intelligence Unit-India (FIU-IND), the tax / revenue authorities in India or outside India wherever it is legally required and other investigation agencies without any obligation of advising me/us of the same. Further, I/We authorize to share the given information to other SEBI Registered Intermediaries /or any regulated intermediaries registered with SEBI / RBI / IRDA / PFRDA to facilitate single submission / update & for other relevant purposes. I/We also undertake to keep you informed in writing about any changes / modification to the above information in future and also undertake to provide any other additional information as may be required at your / Fund's end. As may be required by domestic or overseas regulators/ tax authorities, I/We authorize Fund/AMC/RTA to withhold and pay out any sums from your account or close or suspend your account(s) without any obligation of advising me of the same.

Signature with relevant seal: **Example: Sigturw with stamp**



Place: **Mention the place example:surat**

Date: **date mention**

This is a sample stamp with signature provided for Designated Partner, Director, and Partner—meant only for example and reference purposes. Please use the appropriate stamp as per the required account type."