

## Supplementary KYC Information & FATCA-CRS Declaration - Individuals & HUF

(Please consult your professional tax advisor for further guidance on your tax residency, FATCA / CRS Guidance)

| PAN* C Y B   | P K 8 7                   | 1 7                         | R        | FOLIO NO. *if pa   | an is no | t requir | ed     |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|--|---------------------------|-----------------------------|----------|--------------------|----------|----------|--------|-----|-----------|---|---|--------------------------------|------------------|------------|------|---|---------|--------|-----|-------|---|-----|-------|
| Name A M I   | T K U M                   | 1 A                         | R        |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        | Gen | der   | М |     |       |
| Type of address of   | ential Residential or Bus |                             |          |                    |          | ess      | ~      |     |           | Business  |   |                                |                  | Registered |      |   |         | Office |     |       |   |     |       |
| Place of Birth   | D E L H                   | ı                           |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| Country of Birth   | I N D I                   | А                           |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| Nationality  | I N D I                   | А                           | N        |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| Gross Annual<br>Income Details<br>in INR   | Below 1 Lakh              | 5 - 10 Lacs<br>10 - 25 Lacs | <b>/</b> | ✓ 25 Lacs- 1 Crore |          |          |        | ore |           |   | Net Worth in INR. In Lakhs  ₹ 7 Lakh  Net Worth as on D D M M Y Y Y Y |                                |                  |            |      |   |         |        |     |       |   |     |       |
| Occupation<br>Details  | Business Private Sector   |                             |          |                    |          |          |        |     |           |   |   | Retired Others[Please specify] |                  |            |      |   |         |        |     |       |   |     | fy]   |
| Politically Exposed Person [PEP]   |                           |                             |          | Yes                |          |          |        |     |           | to PEP  |   |                                | Not Applicable ✓ |            |      |   |         |        |     |       |   |     |       |
| Are you a tax resident of any country other than India?  Yes  No   |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| If yes, please indicate all countries in which you are resident for tax purposes and the associated Tax ID Numbers below.  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|  | Tax                       | Tax Identification Number   |          |                    |          |          |        |     |           | Identification Type<br>(TIN or Other, please specify) |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
|  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| To also include USA, where the individual is a citizen / green card holder of The USA In case Tax Identification Number is not available, kindly provide its functional equivalent \$  |                           |                             |          |                    |          |          |        |     |           |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| Certification  |                           |                             |          |                    |          |          |        |     | Signature |   |   |                                |                  |            |      |   |         |        |     |       |   |     |       |
| I / We have understood the information requirements of this Form (read along with the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct, and complete. I / We also confirm that I / We have read and understood the FATCA & CRS Terms and Conditions below and hereby accept the same. |                           |                             |          |                    |          |          |        |     | y<br>/e   |   | ate:  | 0<br>Inc                       | 6<br>lore        | 0          | 9    | 2 | 2 (     | 0      | 2   | 4     |   |     |       |
| For investor core  | nianca Karas C            | nubar-l                     |          | is collective #4:  |          | do.t.e   | ı inf- |     | tion i    | fa  | - d - ±   |                                |                  |            | l ne |   | n n t ! | I      | - m | C a : |   | I M | bu al |

For investor convenience, Karvy Computershare is collecting this mandatory information for updating across all participating Karvy Serviced Mutual Funds (list in the cover email / letter) where you are already an investor or would become an investor in future.

Please submit the form duly filled, signed, for all the holders, separately, and submit at your nearest Karvy Computershare branch or you can dispatch the hard copy to -

Karvy Computershare Pvt. Ltd., Karvy Selenium Tower B Unit - FATCA / CRS / UBO Plot Nos. 31 & 32 | Financial District | Nanakramguda Serilingampally Mandal | Hyderabad - 500032 | India

## **FATCA & CRS Terms & Conditions**

Details under FATCA & CRS: The Central Board of Direct Taxes has notified Rules 114F to 114H, as part of the Income-tax Rules, 1962, which Rules require Indian financial institutions such as the Bank to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our account holders. In relevant cases, information will have to be reported to tax authorities / appointed agencies. Towards compliance, we may also be required to provide information to any institutions such as withholding agents for the purpose of ensuring appropriate withholding from the account or any proceeds in relation thereto.

Should there be any change in any information provided by you, please ensure you advise us promptly, i.e., within 30 days.

It is important that you respond to our request, even if you believe you have already supplied any previously requested information.