'CENTRAL KYC REGI	STRY   Know Your Customer (KYC) Application Form   Legal Entity/ Other than Individuals
[선생님 (1) 전 - 1) - [1] -	are mandatory fields.  F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.  Baroda MUTUAL FUN.  Baroda MUTUAL FUN.
For office use only	Application Type*   New Update
(To be filled by financial in:	stitution) KYC Number (Mandatory for KYC update request)
1. ENTITY DETAILS	* (Please refer instruction A at the end)
□Name*	
Entity Constitution Typ	pe* (Please refer instruction B at the end)
Date of Incorporation	/ Formation* Date of Commencement of Business Date of Commencement
Place of Incorporation	/ Formation* TIN or Equivalent Issuing Country
PAN *	Form 60 furnished
TIN / GST Registration	
MALE CONTRACTOR CONTRA	
	TITY (Pol)* (Please refer instruction B at the end)
	nent(s) in respect of person authorised to transact
Certificate of Incorpo	
Memorandum and A	rticles of Association Partnership Deed Trust Deed
Resolution of Board	/ Managing Committee Power of attorney granted to its manager, officers or employees to transact on its behalf
Activity Proof - 1 (Fo	r Sole Proprietorship Only) Activity Proof - 2 (For Sole Proprietorship Only)
3 ADDRESS* (Plea	ase see instruction C at the end)
3.1 Registered Office	Address / Place of Business*
Proof of Address*	Certificate of Incorporation / Formation Registration Certificate Other Document
Line 1*	
Line 2	
Line 3	City / Town / Village*
District*	PIN / Post Code* State / U.T Code* ISO 3166 Country Code*
3.2 Local Address in	India (If different from Above)*
Line 1*	
Line 1* Line 2	City / Town / Village*
Line 1* Line 2 Line 3	City / Town / Village*
Line 1* Line 2 Line 3 District*	PIN / Post Code* State / U.T Code* ISO 3166 Country Code*
Line 1* Line 2 Line 3 District*	
Line 1* Line 2 Line 3 District*  4 CONTACT DETAIL	PIN / Post Code* State / U.T Code* ISO 3166 Country Code*  LS (All communications will be sent to Mobile number/ Email-ID provided* may be used) (Please refer instruction <b>D</b> at the end)
Line 1* Line 2 Line 3 District*  4 CONTACT DETAIL Tel. (Off)	PIN / Post Code* State / U.T Code* ISO 3166 Country Code*  LS (All communications will be sent to Mobile number/ Email-ID provided* may be used) (Please refer instruction <b>D</b> at the end)  FAX
Line 1* Line 2 Line 3 District*  4 CONTACT DETAIL	PIN / Post Code* State / U.T Code* ISO 3166 Country Code*  LS (All communications will be sent to Mobile number/ Email-ID provided* may be used) (Please refer instruction <b>D</b> at the end)

7. APPLICANT DECLARATION (Please refer Instruction G at the end)  1. I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately, in case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.  1. I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.  Date: Place: Significant / Thumb Impression of Authorised 8. ATTESTATION / FOR OFFICE USE ONLY  Documents Received Certified Copies Equivalent e-document  KYC VERIFICATION CARRIED OUT BY INSTITUTION DETAILS  Identity Verification Done Date Name  Emp. Name Code  Emp. Code  Emp. Designation  Emp. Branch	
I hereby declare that the details furnished above are true and correct to the best of my knowledge and belief and I undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.  I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.  Date: Place: Signature/Thumb Incression of Authorised  8. ATTESTATION / FOR OFFICE USE ONLY:  Documents Received Certified Copies Equivalent e-document  KYC VERIFICATION CARRIED OUT BY: INSTITUTION DETAILS  dentity Verification Done Date Name  Emp. Name  Code  Emp. Code  Emp. Designation  Emp. Branch	
undertake to inform you of any changes therein, immediately. In case any of the above information is found to be false or untrue or misleading or misrepresenting, I am aware that I may be held liable for it.  I/we hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address.  Date: Place: Signature / Thumb Ingression of Authorised  8. ATTESTATION / FOR OFFICE USE ONLY  Documents Received Certified Copies Equivalent e-document  KYC VERIFICATION CARRIED OUT BY INSTITUTION DETAILS  dentity Verification Done Date Name  Emp. Name  Emp. Name  Emp. Designation  Emp. Branch	
Place: Signature/Thumb Impression of Authorised  8. ATTESTATION / FOR OFFICE USE ONLY  Documents Received Certified Copies Equivalent e-document  KYC VERIFICATION CARRIED OUT BY  INSTITUTION DETAILS  dentity Verification Done Date Name  Emp. Name  Emp. Code  Emp. Code  Emp. Designation  Emp. Branch	
8. ATTESTATION / FOR OFFICE USE ONLY  Documents Received	
Documents Received	ed Person(s)
KYC VERIFICATION CARRIED OUT BY  INSTITUTION DETAILS  Identity Verification Done Date Code  Emp. Name Code  Emp. Code  Emp. Designation Emp. Branch	
dentity Verification Done Date Name  Emp. Name Code  Emp. Code  Emp. Designation  Emp. Branch	
Emp. Name  Emp. Code  Emp. Designation  Emp. Branch	
Emp. Code Emp. Designation Emp. Branch	
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No. Totales C. B. C. Land	

### CENTRAL KYC REGISTRY | Instructions / Check list / Guidelines for filling Legal Entity / Other than Individuals KYC Application Form

- Clarification / Guidelines for filing Entity Details section
  - 1 Entity Constitution Type:

D - Private Limited Company

E - Public Limited Company

A - Sole Proprietorship H - Trust B - Partnership Firm I - Liquidator C-HUF

J - Limited Liability Partnership

O - Artificial Jurisdical Person P - International Organisation or Agency /Foreign

Embassy or Consular Office etc.

K - Artificial Liability Partnership Q - Not Categorized

L - Public Sector Banks R - Others

M - Central/State Government Department or Agency S - Foreign Portfolio Investors F - Society

- G Association of Persons (AOP) / Body of Individuals (BOI) N Section 8 Companies (Companies Act, 2013)
- 2 In case of companies and partnerships, PAN of the entity is mandatory. In case of other entitities, FORM 60 may be obtained if PAN is not available.
- Clarification / Guidelines for filling 'Proof of Identity[Poll' section
  - Activity Proof 1 and Activity Proof 2 are applicable for accounts in case of proprietorship firms. Please refer to relevant instructions issued by the Reserve Bank of India in this regard.
  - Please refer to the relevant instructions issued by the regulator regarding applicable documents for the legal entity,
  - Certified copy of document or equivalent e-document or OVD obtained through Digital KYC process to be submitted.
  - 'Equivalent e-document' means an electronic equivalent of a document, issued by the issuing authority of such document with its valid digital signature including documents issued to the digital locker account of the client as per rule 9 of the Information Technology (Preservation and Retention of Information by Intermedianes Providing Digital Locker Facilities) Rules, 2016.
  - 5 'Digital KYC process' has to be carried out as stipulated in the PML Rules, 2005.
  - KYC requirements for Foreign Portfolio Investors (FPIs) will be as specified by the concerned regulator from time to time.
- Clarification / Guidelines for filling 'Proof of Address [PoA]' section
  - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
  - 2 Certified copy of document or equivalent e-document to be submitted.
- Clarification / Guidelines for filling 'Contact Details' section
  - Please mention two- digit country code and 10 digit mobile number (e.g. for Indian mobile number mention 91-999999999).
  - Do not add '0' in the beginning of Mobile number.
- Clarification / Guidelines for filling 'Related Person Details' section
  - - · The name should match the name as mentioned in the Proof of Identity submitted failing which the application is liable to be rejected.
  - 2 Proof of Address [PoA]
    - PoA to be submitted only if the submitted PoI does not have an address or address as per PoI is invalid or not in force.
    - State / U.T Code and Pin / Post Code will not be mandatory for Overseas addresses.
    - In case of deemed PoA such as utility bill, the document need not be uploaded on CKYCR
    - · REs may use the Self Declaration check box where Aadhaar authentication has been carried out successfully for a client and client wants to provide a current address, different from the address as per the identity information available in the Central Identities Data Repository.
  - 3 If KYC number of Related Person is available, no other details except 'Person Type' and 'Name of the Related Person' are required.
  - Regulated Entity (RE) shall redact (first 8 digits) of the Aadhaar number from Aadhaar related data and documents such as proof of possession of Aadhaar. while uploading on CKYCR.
- Provision for capturing signature of multiple authorised persons is to be made by the RE.

☐ Offline verification of Aadhaar

☐ Deemed PoA☐
☐ Self Declaration

### CENTRAL KYC REGISTRY | Know Your Customer (KYC) Application Form | Related Person

### Important Instructions: A) Fields marked with "" are mandatory fields. F) List of State / U.T code as per Indian Motor Vehicle Act, 1988 B) Tick 'v' wherever applicable is available at the end. Baroda C) Please fill the date in DD-MM-YYYY format. G) List of two character ISO 3166 country codes is available at the end. MUTUAL FUND D) Please fill the form in English and in BLOCK letters. H) Please read section wise detailed guidelines / instructions at the end. For particular section update, please tick (v') in the box available before The Bank of Baroda logo belongs to Bank of Baroda logo belong to Bank of Baroda log KYC number of applicant is mandatory for update application. the section number and strike off the sections not required to be updated ☐ Update ☐ Delete For office use only Application Type\* ☐ New (To be filled by financial institution) KYC Number (Mandatory for KYC update and delete request) 1. DETAILS OF RELATED PERSON\* (Please refer instruction E at the end) Addition of Related Person Deletion of Related Person Update Related Person Details KYC Number of Related Person (if available\*) If KYC number is available, only 'Related Person Type' & 'Name' is mandatory Related Person Type\* | Director Promoter Karta Trustee Partner Court Appointment Official Proprietor □ Beneficiary □ Authorised Signatory □ Beneficial Owner □ Power of Attorney Holder ☐ Other (Please specify) (Mandatory if Related Person Type is Director) DIN (Director Identification Number) 1.1 PERSONAL DETAILS (Please refer instruction E at the end) First Name Middle Name Last Name Name\* (Same as ID proof) Maiden Name Father / Spouse Name Mother Name Date of Birth\* Gender' M- Male F- Female T-Transgender Nationality\* IN- Indian Others (ISO 3166 Country Code ) PAN\* Form 60 furnished 1.2 PROOF OF IDENTITY AND ADDRESS\* (Please refer instruction E at the end) I Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs) A- Passport Number □ РНОТО B-Voter ID Card C- Driving Licence D-NREGA Job Card E-National Population Register Letter F - Proof of Possession of Aadhaar 11 0 E-KYC Authentication III 🗆 Offline verification of Aadhaar Address Line 11 Line 2 Line 3 City / Town / Village\* District\* Pin / Post Code\* State / U.T Code\* ISO 3166 Country Code\* 1.3. CURRENT ADDRESS DETAILS (Please refer instruction E and the end) Same as above mentioned address (In such cases address details as below need not be provided) Certified copy of OVD or equivalent e-document of OVD or OVD obtained through digital KYC process needs to be submitted (anyone of the following OVDs) A- Passport Number ☐ B-Voter ID Card ☐ C- Driving Licence ☐ D-NREGA Job Card ☐ E- National Population Register Letter F - Proof of Possession of Aadhaar E-KYC Authentication

Line 1*																			
Line 2																			
Line 3											City	Tow	m / V	llage*					
District*			Pin / Post	Code*	Ш				State	U.T	Code	•			SO 3	166 (	Count	ry Co	de*
1. 4 CONTACT DETAIL	.S (All communicat	ion will be	sent on p	rovided	l mobile	no./E	Email-	ID) (P	lease	refer	nstru	ation	D at	the en	d)				
Tel. (Off)			Tel	(Res)			H I					Mol	bile						LII
Email ID																			
2. APPLICANT DECLA	RATION																		
Date: 3. ATTESTATION / FOI			ace;			110							Sign	ature /	Thumb	) Impi	ressio	n of A	pplicant
Documents Received	☐ Certified Cop			100	-KYC o				UIDA		I	] [	Data r	eceive	d from	Offi	ine ve	erifica	tion
	☐ Digital KYC p	rocess	OUT BY	100					UIDA		INS					n Offi	ine ve	erifica	tion
		rocess	OUT BY	100		ent e-do			UIDA		INS			DETA		n Offi	ine ve	erifica	tion
ку	☐ Digital KYC p	rocess	OUT BY	100		ent e-do Na	ocume		UIDA		INST					n Offi	ine ve	erifica	tion
KY Date	☐ Digital KYC p	rocess	OUT BY	100		ent e-do Na	ocume ame		UIDA		INST					n Offi	ine ve	erifica	tion
KY Date Emp. Name Emp. Code	☐ Digital KYC p	rocess	OUT BY	100		ent e-do Na	ocume ame		UIDA		INST					n Offi	ine ve	erifica	tion
KY Date Emp. Name	☐ Digital KYC p	rocess	OUT BY	100		ent e-do Na	ocume ame		UIDA		INST					n Offi	ine ve	erifica	tion

# For Non Individuals FATCA, CRS & Ultimate Beneficial Owner (UBO)



ARN - 64917 EUIN - E434563

Name of th	e entity																												
Type of add	dress given at KRA	Residential or Busir "Address of tax residence			Resider en as a			Busii (RA da			Reg				ise ap	oproa	ch KF	1 & AS	notify	the c	hange	:S"							
Folio No.					/												/												
PAN			Dat	e of	incorp	oratior	1	D D	M	M	Υ	Υ	Υ	Υ															
City of ince	orporation								Co	ountry	of in	corpo	oratio	n															
Entity Con	stitution Type (Please ti	ck as appropriate) P	artnership F	Firm		HUF		Private	e Limit	ed Co	mpany	,	Pi	ublic L	imite	d Cor	mpan	y		Societ	у [	A	OP/BC	OI	Tr	rust	l	Liquid	lator
		☐ Li	imited Liabi	lity P	artners	hip		Artifici	al Jurio	dical F	Person		_ o	thers								spe	cify						
Please tick	k the applicable tax re	sident declaration:																											
1. Is "En	tity" a tax resident of	any country other	than India	a [	Yes	□No	(If y	yes, ple	ase pr	ovide o	country	/ies in	n whic	h the e	entity	is a r	esider	nt for	tax p	urpose	s and	the as	ssociat	ted Ta	ax ID n	iumber	belov	v.)	
	Cou	ntry					Т	ax Ide	entifca	ation N	Numb	er <sup>%</sup>						lo	denti	ficatio	on Ty	pe (T	ΓIN or	Othe	r, plea	ise spe	cify)		$\overline{}$
																													_
%In case To	ax Identification Number is	s not available, kindly n	rovido ite fu	netic	anal agu	iivalont <sup>s</sup>																							
	I or its functional equivale							numbe	r or Gl	obal E	Entity Id	dentifi	cation	Num	ber o	r GIIN	N, etc.												
	e Entity's Country of In er to para 3(vii) exemption coo								ecifie	d U.S	. Pers	on, r	nenti	on Er	ntity's	s exe	empti	on c	ode	here									
FATCA	& CRS Declaratio	n please consult	t vour p	rofe	essio	nal ta	ха	dvis	or fo	r fur	ther	aui	dan	се о	n F	ATC	A &	CR:	S c	assi	ficat	ion							
PART A	-	cial Institutions or Dir										J																	
We are a,	(	Global Intermediary I	Identificati	on N	Numbe	r (GIIN	)																				$\overline{}$		
Financial	institution³	Note: If you do not have	a GIIN but	you	are spo	onsored	by a	nother	entity,	, pleas	se prov	ide yo	our sp	onsor	's GI	IN ab	ove a	nd in	dicat	e your	spons	sor's i	name '	belov	٧				
	or orting NFE⁴	Name of sponsoring	entity																								$\Box$		
(please tick	as appropriate)																												
GIIN not a	available (please tick as	applicable)	lied for																										
If the entity	is a financial institution,	Not required to	o apply for -	- plea	ase spe	cify 2 d	igits	sub-ca	tegory	/ <sup>10</sup>				_ N	lot o	btain	ed -	Non-	part	icipat	ing F	I							
PART B	(please fill any one a	as appropriate "to be	filled by N	NFE	s other	than [	Direc	ct Rep	orting	NFE	s")																		
1	Is the Entity a publicl					se	1	Yes [	(lt	f yes,	please	spec	ify an	y one	stoc	k excl	hange	e on v	vhich	the s	tock is	s regi	ularly t	trade	d)				
	shares are regularly trac	ded on an established s	securities m	arke	t)	_ N	10	Name	of sto	ock e	xchar	ge																	
2	Is the Entity a related						1	Yes	(It	f yes, p	olease	specif	y nam	ne of th	ne list	ed co	mpan	y and	one	stock 6	exchan	ige oi	n which	h the	stock i	is regul	arly tr	aded)	,
	securities market)	cs are regularly traded	on an esta	DIIOII	ou	_ N	NO	Name				ny																	
								Nature	e of	relation	on:		Sı	ubsidi	ary o	of the	Listed	d Co	ompa	any	or		Co	ntroll	ed by	a Liste	ed Co	ompa	iny
3	Is the Entity an active	e <sup>1</sup> Non-Financial Enti	itv (NFE)				-	Yes [	(lt	f ves.	please	fill U	BO de	eclara	tion i	n the	next s	sectio	on.)										믝
			·-, (· ·· · =)			_ N		Nature	_ `										,										
								Please	e spe	cify th	ne sub	-cate	egory	of A	ctive	NFE			(1	/lentio	n code	ə-refe	er 2c o	of Par	t D)				
4	Is the Entity a passiv	e <sup>2</sup> NFE						Yes	(l	f yes,	please	fill U	JBO d	eclara	tion i	in the	next	secti	on.)										
						_ N	NO.	Natur	e of B	usine	ess																		

PART C			
UBO Declaration			
Category (Please tick applicable category) Unlist	ted Company	shility Partnership Company Unincorporated ass	sociation / body of individuals Private Trus
	c Charitable Trust Religious Trust Others	is in the state of	
Please list below the details of controlling controlling person(s).	person(s), confirming ALL countries of tax res	sidency / permanent residency / citizenship a	nd ALL Tax Identification Numbers for EACH
Details	UBO1	UBO2	UBO3
Name			
PAN			
Address			
	Zip	Zip Zip	Zip IIII
	State	State	State
	Country	Country	Country
Address Type	☐ Residence ☐ Registered office ☐ Business	Residence Registered office Business	☐ Residence ☐ Registered office ☐ Business
Date of Birth	D D M M Y Y Y	D D M M Y Y Y	D D M M Y Y Y
Gender	☐ Male ☐ Female ☐ Others		
Father's Name (Mandatory if PAN is not available)			
City of Birth			
Country of birth			
Occupation Type	☐ Service ☐ Business☐ Others	☐ Service ☐ Business☐ Others	☐ Service ☐ Business☐ Others
Nationality			
UBO Type Code <sup>11</sup>			
Country of Tax residency*			
Tax ID No.%			
Tax ID Type			
Percentage of Holding (%)^			
Politically Exposed Person (PEP) Status <sup>12</sup>	☐ PEP ☐ Related to PEP☐ Not Applicable	☐ PEP ☐ Related to PEP☐ Not Applicable	☐ PEP ☐ Related to PEP☐ Not Applicable
# Additional details to be filled by controlling persons * To include US, where controlling person is a US citizens.	with tax residency / permanent residency / citizenship / zen or green card holder	Green Card in any country other than India:	
% In case Tax Identification Number is not available,	kindly provide functional equivalent	_	
<sup>12</sup> PEP: PEP are defined as individuals who are or have	attern duly self attested by Authorized Signatory / Comp been entrusted with prominent public functions in a foreig		politicians senior Government/Judicial/military officers
senior executives of state owned corporations ,importa		and Conditions	
The Central Roard of Direct Taxon has notified Di	FATCA - CRS Terr les 114F to 114H, as part of the Income-tax Rules,	ms and Conditions	one such as Investment Entities to sock additional
personal, tax and beneficial owner information and	d certain certifications and documentation from all of equired to provide information to any institutions suc	ur account holders. In relevant cases, information w	rill have to be reported to tax authorities/ appointed
•	rided by you, please ensure you advise us promptly, i.	e., within 30 days.	
Please note that you may receive more than one re even if you believe you have already supplied any p	quest for information if you have multiple relationships reviously requested information.	s with Baroda Mutual Fund or its group entities. There	efore, it is important that you respond to our request.
foreign country information field along with the UST		•	•
	lent if the country in which you are tax resident issues	such identifiers. If no TIN is yet available or has not ye	et been issued, please provide an explanation
CERTIFICATION			
	nents of this Form (read along with the FATCA & C We have read and understood the FATCA& CRS		

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 above and hereby accept the same.

Name

Designation

Signature

Signature

Signature

### **PART D FATCA Instructions & Definitions**

- 1. (I) Financial Institution (FI) The term FI means any financial institution that is a Depository Institution, Custodial Institution, Investment Entity or Specified Insurance company, as defined
  - Depository institution: is an entity that accepts deposits in the ordinary course of banking or similar business.
  - (iii) Custodial institution is an entity that holds as a substantial portion of its business, financial assets for the account of others and where it's income attributale to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of
    - (i) The three financial years preceding the year in which determination is made: or
    - (ii) The period during which the entity has been in existence, whichever is less.
  - (iv) Investment entity is any entity:
    - (a) That primarily conducts a business or operates for or on behalf of a customer for any of the following activities or operations for or on behalf of a customer
    - (i) Trading in money market instruments (cheques, bills, certificates of deposit, derivatives, etc.); foreign exchange; exchange, interest rate and index instruments; transferable securities; or commodity futures trading; or
    - (ii) Individual and collective portfolio management: or
    - (iii) Investing, administering or managing funds, money or financial asset or money on behalf of other persons;

or

(b) 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 above.

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.

The term "Investment Entity" does not include an entity that is an active non-financial entity as per codes 04, 05, 06 and 07 - refer point 2).

- (v) Specified Insurance Company: Entity that is an insurance company (or the holding company of an insurance company) that issues, or is obligated to make payments with respect to, a Cash Value Insurance Contract or an Annuity Contract.
- FI not required to apply for GIIN: Refer Rule 114(5) of Income Tax Rules, 1962 for the conditions to be satisfied as "non-reporting financial institution and Guidance issued by CBDT in this regard.
  - A. Reasons why FI not required to apply for GIIN:

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, Investment Managers& Executing Brokers
07	Exempt collective investment vehicle
08	Trust
09	Non-registering local banks
10	FFI with only Low-Value Accounts
11	Sponsored investment entity and controlled foreign corporation
12	Sponsored, Closely Held Investment Vehicle

Active Non Financial Entity (NFE) (any one of the following): Refer explanation (A) to 114F(6) of Income tax Rules, 1962 for details:

### Code Sub-category

01 Less than 50 percent of the NFE's gross income for the preceding financial year is passive income and less than 50 percent of the assets held by the NFE during the preceding financial year are assets that produce or are held for the production of passive income;

- The stock of the entity is regularly traded on an established securities market or the non-financial entity is a related entity of an entity. The stock of which is regularly traded on an established securities market
- 03 The NFE is a Governmental Entity, an International Organization, a Central Bank, or an entity wholly owned by one or more of the foregoing;
- 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 this status if the entity functions 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;
- 75 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;
- 06 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;
- 07 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;
- 08 Any NFE that fulfills all of the following requirements:
  - It is established and operated in India exclusively for religious, charitable, scientific, artistic, cultural, athletic, or educational purposes; or it is established and operated in India 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
    or assets;

The applicable laws of the NFE's country or territory of residence or the NFE's formation documents do not permit any income or assets of the NFE to be distributed to, or applied for the benefit of, a private person or non-charitable Entity other than pursuant to the conduct of the NFE's charitable activities, or as payment of reasonable compensation for services rendered, or as payment representing the fair market value of property which the NFE has purchased; and

The applicable laws of the NFE's country or territory 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 country or territory of residence or any political subdivision thereof.

Explanation.- For the purpose of this sub-clause, the following shall be treated as fulfilling the criteria provided in the said sub-clause, namely:-

- (i) an Investor Protection Fund referred to in clause (23EA);
- (ii) a Credit Guarantee Fund Trust for Small Industries referred to in clause 23EB; and
- (iii) an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act;

### 3. Other definitions

(i) 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 votes and value in an entity.

(ii) Passive NFE

The term passive NFE means

- (i) any non-financial entity which is not an active non-financial entity including a publicly traded corporation or related entity of a publicly traded company; or
- (ii) an investment entity defined in clause 1 (iv)(b) of these instructions
- $\mbox{(iii) a withholding for eign partnership or withholding for eign trust;} \\$
- (iii) Passive income

The term passive income includes income by way of:

- (1) Dividends
- (2) Interest
- (3) Income equivalent to interest,
- (4) Rents and royalties, other than rents and royalties derived in the active conduct of a business conducted, at least in part, by employees of the NFE
- (5) Annuities
- (6) The excess of gains over losses from the sale or exchange of financial assets that gives rise to passive income

### PART D FATCA Instructions & Definitions (Contd.)

- (7) The excess of gains over losses from transactions (including futures, forwards, options and similar transactions) in any financial assets,
- (8) The excess of foreign currency gains over foreign currency losses
- (9) Net income from swaps
- (10) Amounts received under cash value insurance contracts

But passive income will not include,in case of a non-financial entitythat regularly acts as a dealer in financial assets, any income from any transaction entered into in the ordinary course of such dealer's business as such a dealer.

### (iv) Controlling persons

Controlling persons are natural persons who exercise control over an entity and includes a beneficial owner under sub-rule (3) of rule 9 of the Prevention of Money-Laundering Rules, 2005 (Maintenance of Records). In determining the beneficial owner, the procedure specified in the following circular as amended from time to time shall be applied, namely:

- DBOD.AML.BC NO 71/14.01.001/2012-13, issued on the 18th January, 2013 by the Reserve Bank of India; or
- (ii) CIR/MIRSD/2/2013, issued on the 24th January, 2013 by the Securities and Exchange Board of India: or
- (iii) IRDA/SDD/GDLC/CIR/019/02/2013, issued on the 4th February, 2013 by the Insurance Regulatory and Development Authority.

In the case of a trust, the controlling person 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 a trust, controlling person means persons in equivalent or similar positions.

Where no natural person is identified the identity of the relevant natural person who holds the position of senior managing official.

### (A) Controlling Person Type:

Code	Sub-category
01	CP of legal person-ownership
02	CP of legal person-other means
03	CP of legal person-senior managing official
04	CP of legal arrangement-trust-settlor
05	CP of legal arrangement-trust-trustee
06	CP of legal arrangement-trust-protector
07	CP of legal arrangement-trust-beneficiary
08	CP of legal arrangement-trust-other
09	CP of legal arrangement-Other-settlor equivalent
10	CP of legal arrangement-Other-trustee equivalent
11	CP of legal arrangement-Other-protector equivalent
12	CP of legal arrangement-Other-beneficiary equivalent
13	CP of legal arrangement-Other-other equivalent
14	Unknown

- (v) Specified U.S. person AU.S person other than the following:
- (i) a corporation the stock of which is regularly traded on one or more established securities markets;
- (ii) any corporation that is a member of the same expanded affiliated group, as defined in section 1471(e)(2) of the U.S. Internal Revenue Code, as a corporation described in clause (i);
- (iii) the United States or any wholly owned agency or instrumentality thereof;
- (iv) any State of the United States, any U.S. Territory, any political subdivision of any of the foregoing, or any wholly owned agency or instrumentality of any one or more of the foregoing;
- any organization exempt from taxation under section 501(a) of the U.S. Internal Revenue Code or an individual retirement plan as defined in section 7701(a)(37) of the U.S. Internal Revenue Code;
- (vi) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (vii) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (viii) any regulated investment company as defined in section 851 of the U.S. Internal Revenue Code or any entity registered with the U.S. Securities and Exchange Commission under the Investment Company Act of 1940 (15 U.S. C. 80a-64);
- (ix) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- any trust that is exempt from tax under section 664(c) of the U.S. Internal Revenue Code or that is described in section 4947(a)(1) of the U.S. Internal Revenue Code;
- 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 United States or any State;
- (xii) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (xiii) any tax-exempt trust under a plan that is described in section 403(b) or section 457(g) of the U.S. Internal Revenue Code.

### (vi) Direct reporting NFE

A direct reporting NFFE means a NFFE that elects to report information about its direct or indirect substantial U.S. owners to the IRS.

(vii) Exemption code for U.S. persons (Refer 114F(9) of Income Tax Rules, 1962 for details).

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 described 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 United States or any state.
G	Areal estate investment trust.
Н	A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of 1940.
I	A common trust fund as defined in section 584(a).
J	Abank as defined in section 581.
K	Abroker.
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.

## Know Your Client (KYC) Application Form (For Non-Individuals Only)



Place for Intermediary Logo

### Application No.:

Signature Date

A. Identity Details (please see guidelines overleaf)	CVL				ARN - 64	917	EUIN -	E434	563	
4 Name of Ameliana (Nicola) 2							2•			
1. Name of Applicant (Please write complete name as per Certificate of Incor	poration / Registi	ration; lea	ving one	box blank b	etween 2 word	s. Plea	se do no	ot abbre	eviate tl	ne Name).
	1 1 1									
2. Date of Incorporation ddd/mmm//yyyyy	Place of Incorp	oration								
3. Registration No. (e.g. CIN)		Date o	f comm	encement o	f business	d	<b>/</b>   m	m	/   у	y   y
<b>4. Status</b> Please tick (✓) ☐ Private Ltd. Co. ☐ Public Ltd. Co. ☐ Boo	dy Corporate	☐ Partne	rshin	□ Trust / C	narities / NGOs		HUE	□FI		II.
☐ FPI Category I ☐ FPI Category II ☐ FPI Category III ☐ AOP	Bank	Gov	ernment	Body $\square$	Non-Governm					
_ , _ ,	LLP _	Others								
5. Permanent Account Number (PAN) (MANDATORY)			Pleas	e enclose a	duly attested o	opy of	your PA	AN Card	t	
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2. Contact Details				_   Count	y					
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State 5. Proof of address to be provided by Applicant. Please submit A	ANIV ONE of 4	h - <b>6</b> -11-		Count		( ) =		مام مام		
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Name o	Name of Applicant				PAN of the Applicant	
Sr. No.	PAN	Name	DIN (For Directors) / Aadhaar Number (For Others)	Residential / Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Photograph
			<b>\%</b>	Place for		

Intermediary Logo

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Name & Signature of the Authorised Signatory(ies)

Baroda	MUTUAL FUND

# Common Aadhaar linking form across Karvy Serviced Mutual Funds / AIF

Sa	Name of the Non-Individual							
PA	PAN of the Non-Individual							
ARN	ARN - 64917 EUIN - E434563		Consent of Indivic	<b>Consent of Individual Authorized Signatories</b>	gnatories			
I/W <sub>E</sub>	I/We hereby provide my/our consent in accordance with Aadhaar Act, 2016 and regulations made there under, for (i) collecting, storing and usage (ii) validating/authenticating and (ii) updating my/our Aadhaar number (s) including demographic information with the asset accordance with the Aadhaar number (s) including demographic information with the asset management companies of SEBI registered mutual fund and their Registrar and Transfer Agent (RTA) for the purpose of updating the same in my/our folios with my/our PAN.	cordance with Aadhaar Act 3 regulations made there ur mutual fund and their Regis		e under, for (i) collecting, stc wide my/our consent for sh he purpose of updating the s	ons made there under, for (i) collecting, storing and usage (ii) validating / authenticating and (ii) updating my/our Aadhaar number(s) in We hereby provide my / our consent for sharing / disclose of the Aadhaar number(s) including demographic information with the asset sent (RTA) for the purpose of updating the same in my / our folios with my / our PAN.	'authenticating and (ii) u ir number(s) including de //our PAN.	ıpdating my/our Aadhae emographic information	ar number(s) in with the asset
		Details of Aut	Details of Authorized Signatories as available in	n Aadhaar <i>(Kindly use anot</i> .	as available in Aadhaar (Kindly use another form in case of > 6 signatories)	ories)		
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