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

Systematix ARN: 64917 EUIN: E-029678

Please fill in ENGLISH and in BLOCK LETTERS with black ink

Application No.:

Ver. 01-2012

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Details of Promoters/Partners/Karta/Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals

Systematix ARN: 64917 EUIN: E-029678

Name of Applicant		
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Sr. No.	PAN	Name	DIN (For Directors)/ UID (For Others)	Residential/ Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
	(Please attach a copy of your PAN Card)					□ PEP □ RPEP □ NO	
	(Please attach a copy of your PAN Card)					□ PEP □ RPEP □ NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		□ PEP □ RPEP □ NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		□ PEP □ RPEP □ NO	
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Details of Promoters/Partners/Karta/Trustees and whole time directors forming a part of Know Your Client (KYC) Application Form for Non-Individuals *(contd.)*

Sr. No.	PAN	Name	DIN (For Directors)/ UID (For Others)	Residential/ Registered Address	Relationship with Applicant (i.e. promoters, whole time directors etc.)	Whether Politically Exposed	Photograph
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		□ PEP □ RPEP □ NO	
	(Please attach a copy of your PAN Card)			(Please attach proof of your residential address)		□ PEP □ RPEP □ NO	
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	(Please attach a copy of your PAN Card)					□ PEP □ RPEP □ NO	
	(Please attach a copy of your PAN Card)					□ PEP □ RPEP □ NO	

Details of Ultimate Beneficial Owner including Additional FATCA & CRS Information

(Only for Non Individuals)

Systematix ARN: 64917 EUIN: E-029678



Name of the entity Type of address given at KRA Residential or Business Residential Business Registered Office "Address of tax residence would be taken as available in KRA database. In case of any change, please approach KRA & notify the changes" Date of incorporation PAN City of incorporation Country of incorporation Please tick the applicable tax resident declaration: 1. Is "Entity" a tax resident of any country other than India Yes No (If yes, please provide country/ies in which the entity is a resident for tax purposes and the associated Tax ID number below.) Country Tax Identification Number Identification Type (TIN or Other, please specify) In case Tax Identification Number is not available, kindly provide its functional equivalent. In case TIN or its functional equivalent is not available, please provide Company Identification number or Global Entity Identification Number or GIIN, etc. In case the Entity's Country of Incorporation / Tax residence is U.S. but Entity is not a Specified U.S. Person, mention Entity's exemption code here FATCA & CRS Declaration (Please consult your professional tax advisor for further guidance on FATCA & CRS classification) PART A (to be ?lled by Financial Institutions or Direct Reporting NFEs) We are a, GIIN Financial institution⁵ 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 Name of sponsoring entity Direct reporting NFE6 (please tick as appropriate) GIIN not available (please tick as applicable) Applied for ■ Not required to apply for - please specify 2 digits sub-category Not obtained - Non-participating FI If the entity is a financial institution, PART B (please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs") Is the Entity a publicly traded company (that is, a company Yes [(If yes, please specify any one stock exchange on which the stock is regularly traded) No whose shares are regularly traded on an established securities Name of stock exchange Yes 🔲 (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) 2 Is the Entity a related entity² of a publicly traded company ☐ No (a company whose shares are regularly traded on an established Name of listed company securities market) Nature of relation: Subsidiary of the Listed Company Controlled by a Listed Company Name of stock exchange ☐ No 3 Is the Entity an active3 NFE Nature of Business Please specify the sub-category of Active NFE (Mention code-refer 2c of Part C) ☐ No Is the Entity a passive4 NFE Yes 🗀 4 Nature of Business

LIBO Declaration	(Mandatory for all antities except	a Dublick	Traded Company or a related entity of Publicly Traded Company)
UDU DECIALATION	(IVIAITUATO) V TOF All ETTUGES EXCEDT.	a Publiciv	Traded Company of a related entity of Publicity Traded Company

Please list below the details of controlling person(s), confirming ALL countries of tax residency / permanent residency / citizenship and ALL Tax Identification Numbers for EACH controlling person(s). (Please attach additional sheets if necessary)

Owner-documented FFI's should provide FFI Owner Reporting Statement and Auditor's Letter with required details as mentioned in Form W8 BEN E (Refer 3(vi) of part C)

Details	UBO1	UBO2	UBO3									
Name												
PAN / Any Other Identification Number												
UBO Code (Refer 3(iv) (A) of Part C)												
Country of Tax residency*												
Tax ID No.*												
Tax ID Type												
Address												
	Zip	Zip	Zip									
	State	State	State									
	Country	Country	Country									
	Contact detail	Contact detail	Contact detail									
Address Type	☐ Residence ☐ Registered Office ☐ Business	Residence Registered Office Business	Residence Registered Office Business									
City of Birth												
Country of Birth												
Occupation Type	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others	☐ Service ☐ Business ☐ Others									
Nationality												
Father's Name (Mandatory if PAN is not available)												
Gender	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others	☐ Male ☐ Female ☐ Others									
Date of Birth	D D M M Y Y Y	D D M M Y Y Y	D D M M Y Y Y									
Percentage of Holding (%)^												

If passive NFE, additional details to be filled by controlling persons with tax residency / permanent residency / citizenship / Green Card in any country other than India:

FATCA - CRS Terms and Conditions

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.

Please note that you may receive more than one request for information if you have multiple relationships with DHFL Pramerica Mutual Fund or its group entities. Therefore, it is important that you respond to our request, even if you believe you have already supplied any previously requested information.

If you have any questions about your tax residency, please contact your tax advisor. If any controlling person of the entity is a US citizen or resident or green card holder, please include United States in the foreign country information field along with the US Tax Identification Number.

\$It is mandatory to supply a TIN or functional equivalent if the country in which you are tax resident issues such identifiers. If no TIN is yet available or has not yet been issued, please provide an explanation and attach this to the form.

explanation and attach this to the form.												
CERTIFICATION												
1 / 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.												
Name												
Designation												
Signatures	Signatures	Signatures										
Date D D M M Y Y Y Y Place Place												

^{*} To include US, where controlling person is a US citizen or green card holder

[%]In case Tax Identification Number is not available, kindly provide functional equivalent

[^]Attach valid documentary proof like Shareholding pattern duly self attested by Authorized Signatory / Company Secretary

AADHAAR UPDATION FORM



Systematix ARN: 64917 EUIN: E-029678 MUTUAL FUND															_														
Name of the Firs	st/Sole Applicant:																							I		П			
Existing Folio No	o(s):																									\perp			
Fill the section	(I) in case of Indi	vidu	al lı	nves	tors	els	se f	ill s	ec	tion	(II)	fo	or N	loi	n-In	nd	ivic	uk	al i	nν	est	to	rs.						
I. INDIVIDUAL IN	VESTORS - Aadhaai	· / UID) AI I	Enrol	ment	t No.																							
Investors:	1st Applicant / Unith	older						2nd A	Appli	icant /	/ Unith	old	er								3rd	Apı	olicar	nt / U	Initho	older			
POAs/ Guardian:	1st Applicant / Unith	older						2nd A	Appli	icant /	/ Unith	old	er				3rd Applicant / Unith								nitholder				
II. NON INDIVIDU	AL INVESTORS / PO	A (Ins	stitu	ition)																								
Please attach the	e latest Board Res	olutic	on a	ınd p	orovi	de t	he	deta	ails	of	Auth	noi	rise	d L	_ist	of	Się	gn	ato	rie	es a	CC	corc	ynik	gly	in b	elc	w t	able
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with the asset m	vide my/our conse anagement compa ting the same in m	anies	of S	SEB																									
Signature*:								2nd Applicant Signature / POA Signature / Thumb Impression									3rd Applicant Signature / POA Signature / Thumb Impression										re /		
Name:																													
PAN / PEKRN / ((Mandatory)	CKIN:																												

*Company Seal if applicable

Instructions to fill Aadhaar Updation Form:

- This form should be used by Individual investors for updation of Aadhaar in existing folios and for Non-Individuals to update the Authorised List of Signatories details of Aadhaar at the time of account opening or for updating the details in existing folio.
- The non-individual investors will be required to provide the Aadhaar number / proof of enrolment and PAN of authorized signatories in this form, duly signed by the Authorized Official.
- 3. The details of the Authorised List of Signatories has to be as per the latest Board Resolution as approved by the Board.