

CENTRAL KYC REGISTRY / KNOW YOUR CUSTOMER (KYC) APPLICATION FORM (LEGAL ENTITY/OTHER THAN INDIVIDUALS)



Sponsors: The Investment Trust of India Limited and Fortune Credit Capital Limited

Investment Manager: ITI Asset Management Limited
ITI House, Building no. 36, Dr. R. K. Shirodkar Marg,
Parel, Mumbai 400 012. CIN: U67100MH2008PLC177677

Trustee Company: ITI Mutual Fund Trustee Private Limited

Long-term wealth creators

ARN-64917 E434563

Important Instructions:

- A. Fields marked with '*' are mandatory fields.
- B. Tick '✓' wherever applicable.
- C. Please fill the date in DD-MM-YYYY format.
- D. Please fill the form in English and in BLOCK letters.
- E. KYC number of applicant is mandatory for update application.
- F. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- G. List of two-character ISO 3166 country codes is available at the end.
- H. Please read section wise detailed guidelines/instructions at the end.
- I. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only (To be filled by financial institution)

Application Type* New Update

KYC Number* (Mandatory for KYC update request)

1. Entity Details* (Please refer instruction A at the end)

Name*

Entity Constitution Type* (Please refer instruction B at the end)

Date of Incorporation/Formation* - - Date of Commencement of Business - -

Place of Incorporation/Formation* Country of Incorporation/Formation* Country Code as per ISO 3166*

TIN or Equivalent Issuing Country PAN* TIN/GST Registration Number

2. Proof of Identity (POI)* (Please refer instruction B at the end)

- Officially valid document(s) in respect of person authorised to transact
- Certificate of Incorporation/Formation Registration Certificate Regn Certificate No.
- Memorandum and Articles 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 (For Sole Proprietorship Only) Activity proof – 2 (For Sole Proprietorship Only)

3. Address (Please 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* Zip / Post Code*

State/UT Code* ISO 3166 Country Code*

3.2 Local Address in India (If different from above)*

Line 1*

Line 2*

Line 3*

City / Town / Village* District* Zip / Post Code*

State/UT Code* ISO 3166 Country Code*

4. Contact Details (All communications will be sent to Mobile number/Email-ID provided may be used) (Please refer instruction D at the end)

Tel. (O) - Tel. (R) -

Mobile - Email ID

Mobile - Email ID

5. Related Persons

Number of Related Persons (Please fill Annexure A-2 for each related persons & also refer instruction E at the end)

6. Remarks (If any)

7. Applicant Declaration (Please refer instruction G at the end)

- 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 hereby declare that I am not making this application for the purpose contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I also providing consent to MF/AMC/KRA to share this KYC data with CKYCR, download the information from CKYCR and other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.

[Signature/Thumb Impression]

Date: ||| - |||| - ||||||||

Place : ||||||||||||||||||||

**Signature/Thumb Impression of
Authorised Person(s)**

8. Attestation / For Office Use only

Documents Received Certified Copies Equivalent e-document

KYC documents verification carried out by	Institution details
Identity Verification <input type="radio"/> Done	Name <input type="text"/>
Date: <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> - <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Emp. Name <input type="text"/>	<input type="text"/>
Emp. Code <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Emp. Designation <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
Emp. Branch <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	
<input type="text"/> [Employee Signature]	[Institution Stamp]

ANNEXURE A2 LEGAL ENTITY OTHER THAN INDIVIDUALS CENTRAL KYC REGISTRY / KNOW YOUR CUSTOMER (KYC) APPLICATION FORM (RELATED PERSON)

Sponsors: The Investment Trust of India Limited and Fortune Credit Capital Limited
Trustee Company: ITI Mutual Fund Trustee Private Limited

Investment Manager: ITI Asset Management Limited
ITI House, Building no. 36, Dr. R. K. Shirodkar Marg,
Parel, Mumbai 400 012. CIN: U67100MH2008PLC177677



Long-term wealth creators

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Important Instructions:

- A. Fields marked with '*' are mandatory fields.
- B. Tick '✓' wherever applicable.
- C. Please fill the date in DD-MM-YYYY format.
- D. Please fill the form in English and in BLOCK letters.
- E. KYC number of applicant is mandatory for update application.
- F. List of State/U.T code as per Indian Motor Vehicle Act, 1988 is available at the end.
- G. List of two-character ISO 3166 country codes is available at the end.
- H. Please read section wise detailed guidelines/instructions at the end.
- I. For particular section update, please tick (✓) in the box available before the section number and strike off the sections not required to be updated.

For office use only (To be filled by financial institution)

Application Type* New Update Delete
KYC Number* (Mandatory for KYC update 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
DIN (Director Identification Number) (Mandatory if Related Person Type is Director)

1.1. PERSONAL DETAILS* (Please refer instruction E at the end)

	Prefix	First Name	Middle Name	Last Name
Name* (same as ID proof)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Maiden Name	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Father / Spouse Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Mother Name*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Gender*	<input type="radio"/> M- Male	<input type="radio"/> F- Female	<input type="radio"/> T-Transgender	
Nationality*	<input type="radio"/> IN-Indian	<input type="radio"/> Others (ISO 3166 Country Code)		
PAN*	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

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
 - B-Voter ID Card
 - C-Driving Licence
Driving Licence Expiry Date
 - D-NREGA Job Card
 - E-National Population Register Letter
 - F-Proof of Possession of Aadhaar
- II. E-KYC Authentication
- III. Offline verification of Aadhaar



Address

Line 1*
Line 2
Line 3 City / Town / Village*
District* Zip / Post Code* State/UT Code as per Indian Motor Vehicle Act, 1988

1.3. CURRENT ADDRESS DETAILS (Please refer instruction E at the end)

- Same as above mentioned address (In such cases address details as below need not be provided)
- 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
 - B-Voter ID Card
 - C-Driving Licence
Driving Licence Expiry Date --
 - D-NREGA Job Card
 - E-National Population Register Letter
 - F-Proof of Possession of Aadhaar
- II. E-KYC Authentication
- III. Offline verification of Aadhaar
- IV. Deemed PoA
- V. Self-Declaration

Address

Line 1*

Line 2

Line 3 City / Town / Village*

District* Zip / Post Code* State/UT Code ISO 3166 Country Code*

1.4. Current Contact Details (All communications will be sent on provided Mobile no. / Email-ID provided) (Please refer instruction D at the end)

Tel. (O) - Tel. (R) -

Mobile -

Email ID

2. Applicant Declaration

- 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 hereby declare that I am not making this application for the purpose contravention of any Act, Rules, Regulations or any statute of legislation or any notifications/directions issued by any governmental or statutory authority from time to time.
- I hereby consent to receiving information from Central KYC Registry through SMS/Email on the above registered number/email address. I also providing consent to MF/AMC/KRA to share this KYC data with CKYCR, download the information from CKYCR, and other participating intermediaries as mandated by PMLA Act/Rules/SEBI guidelines.

Date: -- Place :

[Signature/Thumb Impression]

**Signature/Thumb Impression of
Authorised Person(s)**

6. Attestation / For Office Use only

- Documents Received** Certified Copies E-KYC data received from UIDAI Data received from Offline verification
 Digital KYC Process Equivalent e-document

KYC documents verification carried out by		Institution details	
Date:	<input type="text"/> - <input type="text"/> - <input type="text"/>	Name	<input type="text"/>
Emp. Name	<input type="text"/>	Code	<input type="text"/>
Emp. Code	<input type="text"/>	<input type="text"/>	
Emp. Designation	<input type="text"/>		
Emp. Branch	<input type="text"/>		
<input type="text"/> [Employee Signature]			
		<input type="text"/> [Institution Stamp]	

**FATCA, CRS, SUPPLEMENTARY KYC & ULTIMATE BENEFICIAL OWNERSHIP (UBO)
SELF CERTIFICATION FORM FOR NON-INDIVIDUALS**

Sponsors: The Investment Trust of India Limited [erstwhile, Fortune Financial Services (India) Ltd.] and ITI Credit Limited (formerly known as Fortune Credit Capital Ltd.)
Trustee Company: ITI Mutual Fund Trustee Private Limited

Investment Manager: ITI Asset Management Limited
ITI House, Building no. 36, Dr. R. K. Shirodkar Marg,
Parel, Mumbai 400 012. CIN: U67100MH2008PLC177677



Name of the entity															
Type of address given at KRA	<input type="radio"/> Residential or Business			<input type="radio"/> Residential			<input type="radio"/> Business			<input type="radio"/> Registered Office					
PAN							Date of Incorporation	D	D	M	M	Y	Y	Y	Y
City of incorporation															
Country of incorporation															

ADDITIONAL KYC INFORMATION

Gross Annual Income () [Please tick (✓)]	<input type="radio"/> Below 1 Lac <input type="radio"/> 1-5 Lacs <input type="radio"/> 5-10 Lacs <input type="radio"/> 10-25 Lacs <input type="radio"/> >25 Lacs-1 Crore <input type="radio"/> >1 Crore															
Net-worth							as on	D	D	M	M	Y	Y	Y	Y	(Not older than 1 year)
Politically Exposed Person (PEP) Status* (Also applicable for authorised signatories/Promoters/ Karta/Trustee/Whole time Directors)							<input type="radio"/> I am PEP <input type="radio"/> I am Related to PEP <input type="radio"/> Not Applicable									
*PEP are defined as individuals who have been entrusted with prominent public functions by a foreign country, including the Heads of States or of Governments, senior politicians, senior Government/judicial/military officers, senior executives of state owned corporations and important political party officials.																
Non-Individual unit holders involved/providing any of the mentioned services	<input type="radio"/> Foreign Exchange/Money Changer Services <input type="radio"/> Gaming/Gambling/Lottery/Casino Services <input type="radio"/> Money Lending/Pawning <input type="radio"/> None of the above															

FATCA & CRS DECLARATION

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.)

Sr. No.	Country	Tax Identification Number%	Identification Type (TIN or Other%, please specify)
1.			
2.			
3.			

% 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

PART A (To be filled by Financial Institutions or Direct Reporting NFEs)

1.	We are a, Financial institution (Refer 1 of Part C) <input type="radio"/> OR Direct reporting NFE (Refer 3(vii) of Part C) (please tick as appropriate) <input type="radio"/> GIIN not available (please tick as applicable) <input type="radio"/>	GIIN _____ 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 _____ <input type="radio"/> Applied for <input type="radio"/> Not obtained - Non-participating FI <input type="radio"/> Not required to apply for - please specify 2 digits sub-category [] [] (Refer 1 A of Part C)
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PART B (Please fill any one as appropriate "to be filled by NFEs other than Direct Reporting NFEs")

1.	Is the Entity a publicly traded company (that is, a company whose shares are regularly traded on an established securities market) (Refer 2a of Part C)	<input type="radio"/> Yes (If yes, please specify any one stock exchange on which the stock is regularly traded) Name of stock exchange _____ Security ISIN* _____
2.	Is the Entity a related entity of a publicly traded company (a company whose shares are regularly traded on an established securities market) (Refer 2b of Part C)	<input type="radio"/> Yes (If yes, please specify name of the listed company and one stock exchange on which the stock is regularly traded) Name of listed company _____ Nature of relation: <input type="radio"/> Subsidiary of the Listed Company or <input type="radio"/> Controlled by a Listed Company Name of stock exchange _____ Security ISIN* _____
3.	Is the Entity an active NFE (Refer 2c of Part C)	<input type="radio"/> Yes Nature of Business _____ Please specify the sub-category of Active NFE [] [] (Mention code - refer 2c of Part C)
4.	Is the Entity a passive NFE (Refer 3(ii) of Part C)	<input type="radio"/> Yes Nature of Business _____

UBO/CONTROLLING PERSONS' DETAILS (Mandatory for all entities except, a Publicly Traded Company or a related entity of Publicly Traded Company)

Category (Please tick applicable category): Unlisted Company Partnership Firm Limited Liability Partnership
 Unincorporated association/body of individuals Public Charitable Trust Religious Trust Private Trust
 Trust created by a Will Others (please specify _____)

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

Does your company/entity have any individual person(s) who holds direct/indirect controlling ownership above the prescribed threshold limit? Yes No (Refer 3(iv) of Part C)

If 'YES' - We hereby declare that the following individual person holds directly / indirectly controlling ownership in our entity above the prescribed threshold limit. Details of such individual(s) are given below.

If 'NO' - We declare that no individual person (directly / indirectly) holds controlling ownership in our entity above the prescribed threshold limit. Hence, details of the individual who holds the position of Senior Managing Official (SMO) are provided below.

Details	UBO1/Senior Managing Official (SMO)	UBO2	UBO3
Name of UBO/SMO*			
UBO Code (Refer 3(iv) (A) of Part C)			
UBO/SMO Country of Tax Residency*~			
UBO/SMO PAN*			
UBO/SMO Address			
	Zip <input type="text"/>	Zip <input type="text"/>	Zip <input type="text"/>
	State: _____	State: _____	State: _____
	Country: _____	Country: _____	Country: _____
UBO/SMO Address Type	<input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office	<input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office	<input type="radio"/> Residential <input type="radio"/> Business <input type="radio"/> Registered Office
UBO/SMO Tax ID/Equivalent Id No.* (For Foreign National, TIN to be provided)			
UBO/SMO Email			
UBO/SMO Mobile			
UBO/SMO Tax ID Type			
UBO/SMO City of Birth*			
UBO/SMO Country of birth*			
UBO/SMO Occupation Type	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Others _____	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Others _____	<input type="radio"/> Service <input type="radio"/> Business <input type="radio"/> Others _____
SMO Designation*			
UBO/SMO Nationality			
UBO/SMO Father's Name			
UBO/SMO PEP*	<input type="radio"/> PEP <input type="radio"/> Related to PEP <input type="radio"/> Not a PEP	<input type="radio"/> PEP <input type="radio"/> Related to PEP <input type="radio"/> Not a PEP	<input type="radio"/> PEP <input type="radio"/> Related to PEP <input type="radio"/> Not a PEP
UBO/SMO Gender	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others	<input type="radio"/> Male <input type="radio"/> Female <input type="radio"/> Others
UBO/SMO Date of Birth*	<input type="text"/>	<input type="text"/>	<input type="text"/>
% of Holding of Controlling Persons [§]			
UBO/SMO KYC Complied [#]	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No	<input type="radio"/> Yes <input type="radio"/> No

* Mandatory

~ To include US, where controlling person is a US citizen or green card holder.

If UBO/SMO is KYC compliant, KYC proof to be enclosed. Else PAN or any other valid identity proof must be attached. Position/Designation like Director/Settlor of Trust/ Protector of Trust to be specified wherever applicable.

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

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 require Indian financial institutions to seek additional personal, tax and beneficial owner information and certain certifications and documentation from all our unit 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 us or our 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.

Certification

I/We have read and understood the information requirements and the Terms and Conditions mentioned in this Form (read alongwith the FATCA & CRS Instructions) and hereby confirm that the information provided by me/us on this Form is true, correct and complete. I/We hereby agree and confirm to inform ITI Asset Management Company Limited/ITI Mutual Fund/Trustees for any modification to this information promptly.

Name

Designation

Signature	Signature	Signature	Place Date D D M M Y Y Y Y

PART C – FATCA Instructions & Definitions

1. 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.
- Custodial institution: is an entity that holds as a substantial portion of its business, holds financial assets for the account of others and where its income attributable to holding financial assets and related financial services equals or exceeds 20 percent of the entity's gross income during the shorter of -

- The three financial years preceding the year in which determination is made; or
- The period during which the entity has been in existence, whichever is less.

- Investment entity is any entity:

- ✓ 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
 - 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
 - Individual and collective portfolio management; or
 - Investing, administering or managing funds, money or financial asset or money on behalf of other persons;

or

- ✓ 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 :

- The three-year period ending on 31 March of the year preceding the year in which the determination is made; or
- 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 03, 04, 05 and 06 (refer point 2c.)

- 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:

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	Trustee of an Indian Trust
09	FI with a local client base
10	Non-registering local banks
11	FFI with only Low-Value Accounts
12	Sponsored investment entity and controlled foreign corporation
13	Sponsored, Closely Held Investment Vehicle
14	Owner Documented FFI

2. Non-financial entity (NFE) - Entity that is not a financial institution

Types of NFEs that are regarded as excluded NFE are:

- Publicly traded company (listed company)

A company is publicly traded if its stock are regularly traded on one or more established securities markets

(Established securities market means an exchange that is officially recognized and supervised by a governmental authority in which the securities market is located and that has a meaningful annual value of shares traded on the exchange)

- Related entity of a publicly traded company

The NFE is a related entity of an entity of which is regularly traded on an established securities market;

- Active NFE : (is any one of the following):

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;
02	The NFE is a Governmental Entity, an International Organization, a Central Bank, or an entity wholly owned by one or more of the foregoing;
03	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;
04	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;
05	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;
06	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;
07	Any NFE that fulfils all of the following requirements: <ul style="list-style-type: none"> • 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.

	<p>Explanation - For the purpose of this sub-clause, the following shall be treated as fulfilling the criteria provided in the said sub-clause, namely:-</p> <p>(I) an Investor Protection Fund referred to in clause (23EA);</p> <p>(II) a Credit Guarantee Fund Trust for Small Industries referred to in clause 23EB; and</p> <p>(III) an Investor Protection Fund referred to in clause (23EC), of section 10 of the Act;</p>
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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

- (1) 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
 - (2) an investment entity defined in clause (1) of these instructions
 - (3) a withholding foreign partnership or withholding foreign trust;
- (Note: Foreign persons having controlling interest in a passive NFE are liable to be reported for tax information compliance purposes)

(iii) Passive income

The term passive income includes income by way of :

- (1) Income Distribution cum Capital Withdrawal,
- (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
- (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 entity that 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 (Maintenance of Records) Rules, 2005. 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.

Pursuant to guidelines on identification of Beneficial Ownership issued vide SEBI circular no. CIR/MIRSD/2/2013 dated January 24, 2013, persons (other than Individuals) are required to provide details of Beneficial Owner(s) ('BO'). Accordingly, the Beneficial Owner means 'Natural Person', who, whether acting alone or together, or through one or more juridical person, exercises control through ownership or who ultimately has a controlling ownership interest of/entitlements to:

- (1) More than 10% of shares or capital or profits of the juridical person, where the juridical person is a company;
- (2) More than 10% of the capital or profits of the juridical person, where the juridical person is a partnership; or
- (3) More than 15% of the property or capital or profits of the juridical person, where the juridical person is an unincorporated association or body of individuals.

Where the client is a trust, the financial institution shall identify the beneficial owners of the client and take reasonable measures to verify the identity of such persons, through the identity of the settlor of the trust, the trustee, the protector, the beneficiaries with 10% or more interest in the trust and any other natural person exercising ultimate effective control over the trust through a chain of control or ownership.

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 (UBO):	
UBO 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

(v) Specified U.S. person – A U.S person other than the following:

- (1) a corporation the stock of which is regularly traded on one or more established securities markets;
- (2) 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);
- (3) the United States or any wholly owned agency or instrumentality thereof;
- (4) 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;
- (5) 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;
- (6) any bank as defined in section 581 of the U.S. Internal Revenue Code;
- (7) any real estate investment trust as defined in section 856 of the U.S. Internal Revenue Code;
- (8) 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);
- (9) any common trust fund as defined in section 584(a) of the U.S. Internal Revenue Code;
- (10) 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;
- (11) 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;
- (12) a broker as defined in section 6045(c) of the U.S. Internal Revenue Code; or
- (13) 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) Owner documented FI

An FI meets the following requirements:

- (a) The FI is an FI solely because it is an investment entity;
- (b) The FI is not owned by or related to any FI that is a depository institution, custodial institution, or specified insurance company;
- (c) The FI does not maintain a financial account for any non participating FI;
- (d) The FI provides the designated withholding agent with all of the documentation and agrees to notify the withholding agent if there is a change in circumstances; and
- (e) The designated withholding agent agrees to report to the IRS (or, in the case of a reporting Model 1 IGA, to the relevant foreign government or agency thereof) all of the information described in or (as appropriate) with respect to any specified U.S. persons and (2). Notwithstanding the previous sentence, the designated withholding agent is not required to report information with respect to an indirect owner of the FI that holds its interest through a participating FI, a deemed-compliant FI (other than an owner-documented FI), an entity that is a U.S. person, an exempt beneficial owner, or an excepted NFE.

(vii) Direct reporting NFE

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

(viii) Exemption code for U.S. persons

Code	Sub-category
A	An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
B	The United States or any of its agencies or instrumentalities
C	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	A real estate investment trust
H	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)t
J	A bank as defined in section 581
K	A broker
L	A trust exempt from tax under section 664 or described in section 4947(a)(1)
M	A tax exempt trust under a section 403(b) plan or section 457(g) plan